Welcome Message from the Editor!

In this issue, you will see several new items, such as a Researcher being Showcased, From the Librarian, and a section on our Graduate Students. Thank you to everyone who has contributed and I look forward to receiving your submissions for the next Edition in early June 2017.

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Mina D. Singh RN, PhD
Associate Director, Research
Associate Professor
School of Nursing

Dr. MacDonnell brings a background in Sociology and Equity Studies in Education (PhD) and Teaching/Learning (MEd), having completed a post-doctoral fellowship in Health Services and Nursing Research at York University. Her research program focuses on gender, diversity, health, equity, participatory policy approaches, and social justice and is grounded in several decades of nursing practice in community, hospital, and academic settings. Her focus on lesbian, gay, bisexual, trans, and queer (LGBTQ) and
minority health/education and nurses’ political practice began two decades ago. Her research has been informed by engagement with communities through community-based research (CBR) and coalition work with stakeholders such as the Ontario Public Health Association (OPHA), Rainbow Health Ontario (RHO) and the Registered Nurses Association of Ontario (RNAO). Her research encompasses qualitative and mixed methods and a more recent focus on synthesis. She has found that using critical feminist and intersectional approaches to health and policy research are innovative nursing methodologies with broad reach and interdisciplinary impact. Through collaborations with nursing and interdisciplinary faculty across universities, her work includes feminist ethnography (MacDonnell, 2001), critical discourse analysis (Daley & MacDonnell, 2011), comparative life history (MacDonnell, 2011; MacDonnell & Buck-McFadyen, 2017), constructivist grounded theory (MacDonnell, Dastjerdi, Khanlou, Bokore, & Tharao, 2017), feminist political economy (Choiniere, MacDonnell, & Shamonda, 2010), and transformative learning (MacDonnell & Macdonald, 2011). Studies have had implications for critical/feminist pedagogy (MacDonnell, 2009), feminist geography (MacDonnell & Andrews, 2006), feminist economics (MacDonnell, 2007) and feminist mothering (MacDonnell, 2014).

LGBTQ Access

LGBTQ-focused Best Practice Guidelines

In conjunction with colleagues from RNAO’s Rainbow Nursing Interest Group, research colleagues and LGBTQ communities, Dr. MacDonnell has been involved in research and advocacy to undertake an RNAO Best Practice Guideline on LGBTQ Health. RNAO has announced that they will be moving forward with this BPG in the near future.

LGBTQ Home Care Access:

Since 2009, home care has emerged as a major focus for her LGBTQ research in collaboration with Dr. A. Daley, her Co-PI. After completing several small studies from 2009-2011, including a focus on Interprofessional Education, they received CIHR funding (2011-2016) for a multi-phase, mixed methods study. Co-Investigators included researchers at McGill and McMaster Universities and partners from Rainbow Health Ontario and Toronto Central Community Care Access Centre and Dr. M. St. Pierre, a Post-Doctoral Visitor on the project. To undertake this environmental scan of Ontario home care, the researchers worked closely with advisory groups in all phases of this CBR (see project website for details): http://www.yorku.ca/lgbthome

The team held a Think Tank of invited stakeholders to discuss implications for knowledge translation and uptake and launched the project findings at a community forum held at the 519 Community Centre in Toronto and the Rainbow Health Ontario conference in London, Ontario in 2016. They were invited to share findings with diverse providers, community members and decision-makers including the Ministry of Health and Long-Term Care, Ontario Association of Community Care Access Centres and RNAO. The findings on this study, the first of its kind to comprehensively examine LGBTQ access to home care, have also been presented to the Gay and Lesbian Medical Association in Baltimore and the
Findings will be shared at the upcoming Canadian Community Health Nurses conference in June, 2017. Most notably, the project’s findings address:

- LGBTQ home care users’ interactions with service providers
- LGBTQ education/training-related experiences and needs of home care providers
- Implications for home care agencies to enhance LGBTQ access to their services
- A user-friendly LGBTQ Home Care Access and Equity Tool for home care agencies
- A user-friendly one-page educational tool on LGBTQ patient values, *Queering Home Care*

Recent publications and user-friendly reports and project material are listed below and available at:

http://yorkspace.library.yorku.ca/xmlui/handle/10315/31416


**Lesbians and Bisexual Women with Reproductive Cancer**

As MScN thesis supervisor for Laura Legere, who was the recipient of an Ontario Graduate Scholarship, Dr. MacDonnell has published on the experiences of lesbians and bisexual women with reproductive cancer and they will be presenting this research at an upcoming conference.


Dr. MacDonnell’s other recent LGBTQ research has focused on families and long-term care with forthcoming publications.

**LGBTQ Families**


**LGBTQ Access to Long-Term Care (LTC) (CIHR-funded)**


**Immigrant Women and Activism**

(CERIS, Faculty of Health, and CIHR): Since 2009, she has led/co-led (with Dr. M. Dastjerdi) a collaboration, CBR, with Women’s Health in Women’s Hands Community Health Centre that studies the link between activism and racialized women’s mental health and wellbeing. This grounded theory study and associated knowledge translation activities, which
foreground race and gender provided unique evidence that activism can promote the mental health of racialized immigrant women. Findings were endorsed by diverse immigrant women at a 2011 community forum and service provider, researcher and community stakeholders at a 2013 Think Tank. Study findings point to dimensions of wellbeing for racialized immigrant women including resilience, self-determination and citizenship that have important implications for research, practice and policy (MacDonnell et al., 2012; 2017). This study was originally funded by CERIS and York University and from 2013 to 2017 was funded by a Knowledge Translation Grant for a two-pronged knowledge translation and mobilization strategy. This included the development of brochures that were based on team’s earlier grounded theory research on fostering racialized women’s wellbeing. The brochures were developed in conjunction with various language communities served by Women’s Health in Women’s Hands CHC (e.g., Urdu, Somali, Mandarin, Spanish, Bengali), communities often underserved by the mental health sector. The brochures were used to mobilize knowledge from the communities and to spark discussions of activism and mental health with racialized immigrant women, topics themselves that are often stigmatized or silenced in these communities and rarely discussed in relation to each other. Based on the dialogues at the stakeholder Think Tank, the researchers created an action plan report with research, policy and program recommendations based on engagement with activists, diverse mental health and settlement stakeholders which were summarized in a policy document that was shared with CIHR and are being widely disseminated. Project reports/material will be available soon at: https://yorkspace.library.yorku.ca/xmlui/

The next stage of the project focuses on building service provider capacity to promote activism-based mental health. Recent publications/material include:


Generational Differences in Activism in Nursing (SSHRC-funded):
Another life history policy study which she led emerged from her dissertation focus on nurses’ activism. Her team was comprised of interdisciplinary masters/PhD students and graduates. The study is winding up with publications underway. Emerging findings have policy implications for nursing educators and have been shared at the Canadian Community Health Nurses and Canadian Association of Schools of Nursing (CASN) Education and Research conferences. Development of clear language summaries is underway and will be posted at:
https://yorkspace.library.yorku.ca/xmlui/handle/10315/32835


Transformative Education

This research has focused on arts-based and critical pedagogies that can spark transformative learning in education, especially in relation to equity education in professional curriculum (MacDonnell, 2009; Macdonald & MacDonnell, 2008; 2016; MacDonnell & Macdonald, 2011). Recent collaborations with Dr. Gail Mitchell and team are focusing on innovations in e-learning and online learning, such as Daagu, in relation to complexity/narrative pedagogies and implications for meaningful education for diverse groups of teachers and learners.


Submitted by Dr. Judith MacDonnell


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**Conferences**

**Laura L. Nicholson RN, EdD & Raya Gal BN, MA Certified Healthcare Stimulationist**

**Poster:**


The inclusion of simulation in health care provider curricula continues to expand and has become an expectation that supports patient safety and quality patient care. Moving beyond simply using the technology in isolation, simulation programs must be integrated fully into curricula and course planning pedagogy. This requires a skilled, resourceful simulation educator, or Simulationist. The role of the Simulationist has evolved and is required to meet the needs of contemporary learners and dynamic health care environments.

Ideally, the cornerstone of a successful simulation program’s infrastructure is a talented team who brings clinical content to life (Palaganas et al., 2015)). Historically, many simulation programs began with one energetic early adopter and a truckload of simulation equipment. In the early days of simulation, 10-15 years ago, healthcare provider education programs recruited individuals based on strong clinical experience and/or a background of education experience. Most, if not all, early simulationists started to work with the technology without understanding the basics of simulation methodology for teaching and learning. Today’s Simulationists represent a variety of professional backgrounds and their roles and responsibilities are diverse.

In order to gain perspective about the current and future role of the Simulationist, there is value in critically analyzing the role’s evolution; taking a look back as we continue to move forward. This poster will present a systematic review of the major needs of simulation centres and the job summaries of Simulationists. Evidence-based recommendations will explore potential best practices in requirements.
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Scholarship News

for the modern Simulationist into the future.

Rose Steele, RN, PhD

Paper:

Poster:
Davies, B., & Steele, R. (2016, November). Best practices of provider/parent interactions when children are seriously ill. Poster session presented at the 3rd Congress on Paediatric Palliative Care – A Global Gathering, Rome, Italy.

Workshops

Nicholson Laura, McCulloch Tara, Gal Raya. “Simulation in the Classroom: From Idea to Execution.” 17th International Meeting on Simulation in Healthcare, Orlando, Florida, USA, January 31, 2017. Workshop Partner: Centennial College Classroom simulations provide undergraduates an opportunity to bring to life course concepts. Classroom simulations provide creative stimulation of students' knowledge, skills, and decision-making; addressing student learning needs and styles. Using simulation in the classroom is a strategic methodology to address the affective domain. Scenarios based on real life events challenge students to engage and confront own values, biases, communication responses, thoughts and feelings.

Learning Objective
1. Discuss benefits and challenges of simulation in the classroom implementation
2. Identify potential resources required for simulation in the classroom implementation
3. Create a simulation for classroom implementation

Raya Gal BN, MA
Certified Healthcare Stimulationist


Partner: York university - Kinesiology

Background Rationale
In 1999 the Institute of Medicine released a report, To Err is Human: Building a Safer Health System. This report amongst many recommendations revealed the numerous challenges of working in healthcare and the primary outcomes were to recognize the potentials for error and reduce their occurrence through improved interprofessional communication. This was the starting point for emphasis on Interprofessional Education. Preparing to work with the public in healthcare requires engagement in an education program filled with learning.
new knowledge, skills and decision-making. To help facilitate these requirements, health care education program curricula are required to meet external professional competency expectations. The World Health Organization (2010) identified interprofessional education occurs when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes. Since 2007, education programs enhanced the inclusion of simulation in curricula, and SIM-One formed as an organization to bring like-minded simulation people together to strategically improve health care through education. While interprofessional education is easy to define, it is more challenging to undertake; especially when an educational organization does not have traditional healthcare programs. A different approach to the WHO definition above is to provide a simulated environment for two or more professional student groups who are not traditionally associated with one another, to learn about, from and with each other and emphasize the results of collaboration in improving health outcomes.

Grants and Funding

Celina Da Silva, MN, PHD


This work in disability aligns with research Celina Da Silva is doing as a co-investigator on a different SSRHC grant.

MScN Thesis Student

Travis Amell, RN, BScN, CHPCN(C), CDE, ASIST, MScN (Candidate),

I graduated in 2010 from Laurentian University with my BScN and completed a short stint in acute care before following my passion into community health nursing. I was a rural visiting nurse for four years caring for people of all ages and health problems in their homes, schools, retirement/LTC homes and workplaces. As an RN, the majority of my visits consisted of caring for oncology clients and through that experience my mind and soul was opened up to the art and science of palliative care nursing. Through my professional observations of rural palliative caregivers and
Through my own personal experiences, I became inspired to complete my thesis research study at York. I have completed a hermeneutic phenomenology study utilizing eight participant interviews called “The lived experience of bereaved caregivers: Caring for loved ones at end of life in rural Ontario home settings”.

I would like to acknowledge the RNAO Palliative Care Interest Group for choosing me to receive an education award because of my work in palliative care and my thesis study. Currently, I am working as a palliative care visit nurse in an urban setting and it has been a transformative process for my nursing career having switched from the rural care mindset. My volunteer work mainly consists of preceptoring third and fourth year undergraduate nursing students in the community setting. I hope to one day practice as an Advanced Practice Nurse in Palliative Care and teach undergraduate nursing students the art and science of nursing and more specifically sound palliative care.

Graduate Student Professional Practice Placement Highlights

Margaret Lebold RN, BScN

Margaret Lebold, a MScN thesis student, completed her NURS 5400 placement at RNAO with Sebrina Merali, a preceptor who is a Program Manager, International Affairs and Best Practice Guidelines at RNAO. She has developed a SDOH module which is listed under the mental health and addictions section of the e-learn modules at RNAO and can be accessed, free of charge at: http://mao.ca/bpg/courses/nursing-towards-equity-applying-social-determinants-health-practice OR http://elearning.rnao.ca/. Margaret is also completing her thesis entitled, “Canadian Mothers’ Contemporary Experiences Accessing Abortion Services”, with Dr. Macdonnell. Her academic work on mothers is grounded in her public health nursing experience in sexual health, reproductive health, and family health, where she has been exposed to the complexity of factors influencing diverse mothers’ health and wellbeing. While doing her MScN program, Margaret has also worked as a research assistant for Dr. Claire Mallette.

From the librarian

Genny Jon – Adjunct Librarian

Finding a Journal with Ethical Publishing Practices as a Venue for Your Research

As the need to publish in Open Access publications grows, there is concern that
some publications requiring fees may not be ethical. The Canadian Association of Research Libraries (CARL), of which York University is a member, notes that such publishers lack discernible scholarship, academic rigour, or credibility. CARL has compiled a list of common characteristics of predatory publishers (Canadian Association of Research Libraries, n.d.).

**Common Characteristics of Predatory Publishers**

- High manuscript acceptance rates or acceptance guarantees
- The publisher sends you an unsolicited invitation to submit an article for publication
- Minimal (or non-existent) peer review process
- Little attention paid to digital preservation
- Not necessarily indexed in electronic databases
- Journals may be short-lived
- No archiving policy

**Use “Whitelists”**

Some have relied on Jeffrey Beall’s, now removed, list of predatory publications to vet publication choices. Unfortunately, nursing was not immune to suspected predatory publishing practices. Oermann et al found 140 mostly new nursing journals included in Beall’s list (Oermann et al., 2016). Fortunately, the impact of predatory publishing may not be as great as feared. The percentage of predatory journals from Beall’s list included in ProQuest Central, EBSCO Academic Search Complete, Gale Academic OneFile and the Directory of Open Access Journals (DOAJ) was found to be in the order of 0.5-2.25% (Nelson & Huffman, 2015). Thus, choosing to publish in a reputable journal for your subject area that is included in one of the major indices or databases is a way of ensuring a higher likelihood of avoiding unethical publishing practices.

Some find that blacklists such as Beall’s lists are controversial because criteria for inclusion may not be clear. Furthermore, those who maintain the lists may not have time to review the status of the listed publications over time. Verifying that a publication is on a “whitelist” of clearly defined reputable journals may be the better way to proceed (Neylon, 2017). For nursing, a valuable resource when confirming the reputation of a journal is the Directory of Nursing Journals (https://nursingeditors.com/journals-directory/), maintained by the International Academy of Nursing Editors (INANE) and the website, Nurse Author & Editor. The directory is a list of reputable journals that have been vetted according to the criteria posted. Other whitelists include the Directory of Open Access Journals (DOAJ). Inclusion in major publication or database indices such as CINAHL, PubMed, Scopus, or Web of Science is also an indication of a publication’s quality because reputable databases and indices have a rigorous review process when selecting journals for inclusion. Researchers may also refer to the thinkchecksubmit.org website for a checklist of things to consider when trying to identify trusted journals for their research (“thinkchecksubmit,” n.d.)

**Open Access Journal Quality Indicators**

Since it may be difficult to determine the quality of an unfamiliar publication, one way to approach assessment is to consider these Open Access journal quality indicators compiled from Grand Valley State University Libraries, CARL, and thinkchecksubmit.org.

**Positive:**

- Scope of the journal is well-defined and clearly stated
- Journal’s primary audience is researchers/practitioners
York University, School of Nursing

Scholarship News

- Editor, editorial board are recognized experts in the field
- Journal is affiliated with or sponsored by an established scholarly society or academic institution
- Articles are within the scope of the journal and meet the standards of the discipline
- Any fees or charges for publishing in the journal are easily found on the journal web site and clearly explained
- Articles have DOIs (Digital Object Identifier, e.g., doi:10.1111/j.1742-9544.2011.00054.x)
- Journal clearly indicates rights for use and re-use of content at article level (e.g., Creative Commons CC BY license)
- Journal has an ISSN (International Standard Serial Number, e.g., 1234-5678)
- Publisher is a member of Open Access Scholarly Publishers Association
- Publisher is a member of the Committee on Publication Ethics (COPE)
- Journal is registered in Ulrich’s, Global Serials Directory
- Journal is listed in the Directory of Open Access Journals
- Journal is included in subject databases and/or indexes such as CINAHL, PubMed, Web of Science, or Scopus

Negative:

- Journal web site is difficult to locate or identify
- Publisher “About” information is absent on the journal’s web site
- Publisher direct marketing (i.e., spamming) or other advertising is obtrusive
- Instructions to authors information is not available
- Information on peer review and copyright is absent or unclear on the journal web site
- Journal scope statement is absent or extremely vague
- No information is provided about the publisher, or the information provided does not clearly indicate a relationship to a mission to disseminate research content
- Repeat lead authors in same issue
- Publisher has a negative reputation in same issue
- Publisher has a negative reputation (e.g., documented examples in Chronicle of Higher Education, list-servs, etc.)
- The journal claims to have an impact factor but is in fact not listed in the ISI Web of Science or in Scopus, or it uses some made up measure (e.g. “view factor”), feigning international standing.
- Journal name does not adequately reflect origin (e.g., a journal with the word “Canadian” or “Swiss” in a name that has no meaningful relationship to Canada or Switzerland).

Finding information about a journal

When in doubt, investigate the journal before submitting.
Some digging and persistence may be required to find enough information to assess the quality of a publication. Unfortunately, there is no established format for documenting information on any publication’s website or within a physical copy of a publication. Publisher websites should provide enough information for you to assess the editorial policies, affiliations, content included, open access fees, etc. Some locations to check are documented below.

**Journal Information section:** See the pages following
Teaching Commons

March 2017
York University, School of Nursing
Scholarship News

Several Sections in a Menu:
References


York University, School of Nursing

Scholarship News

School of Nursing 3rd Nursing Conference, York University

Healthy Aging: It Takes a Community

October 26, 2017

Call for Abstracts

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<td>• Options for end of life care</td>
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<td>• Students</td>
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<td>• Public policy for healthy aging</td>
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<td>• Mental Health</td>
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Speakers:

Paul-André Gauthier RN, PhD is a specialist in palliative care. In April 2014, he received in Toronto, the June Callwood Award from the Hospice Palliative Care Ontario (HPCO). Recognized for his dedication at the regional, provincial and national levels, Paul André-Gauthier served as a volunteer palliative care professional consultant in Timmins and Sudbury where he continues to accompany terminally ill patients and their families, for example, at the Maison Sudbury Hospice.

Mary Fox RN, PhD is an Associate Professor in the School of Nursing, a prior Ontario Ministry of Health Career Scientist and CIHR fellow and a current Ontario Ministry of Research & Innovation Early Researcher award recipient. Her research contributes to a more comprehensive understanding of function-focused interventions to improve outcomes during and following older adults’ hospitalization. Her expertise includes qualitative and quantitative data analysis; systematic reviews; survey and intervention research; bedrest; and the Acute Care for Elders (ACE) model.
Call for Abstracts for the 3rd Nursing Conference

Healthy Aging: It Takes a Community

October 26, 2017

Podium, poster, and symposium presentations are invited in one of four themes:
1) Social determinants of healthy aging
2) Options for end of life care
3) Care of the caregiver
4) Public policy for healthy aging

Guidelines for Abstract Submission

1. Abstract submission should follow the guidelines below:
   a. Abstract should be 300 words maximum (single spaced, 12 font)
   b. Title in Upper case,
   c. On, the next line, in the upper and lower case, include name of the presenting
      author(s), degrees, position, institutional affiliation, and names and degrees of co-
      authors,
   d. Next, Include the content, problem, theoretical framework (if applicable), and
      purpose of the study/project, methods, results, and implications.
   e. Abstracts for papers to be considered as part of a symposium should be
      submitted together along with the following information on a separate page:
      symposium title, brief overview of the purpose and rationale for the symposium,
      contact person for the group of papers.
2. Presenters (podium and symposium) will be provided a computer with PowerPoint, a
   projector, and a screen.
3. Send our abstract by e-mail attachment (word).
4. Note that submission of this abstract, if accepted, indicates agreement to present your
   work.

Deadline for Receipt of Abstract: May 15th, 2017
Submit to: Mina Singh, Associate Director (Research) & Associate Professor
Email: nursconf@yorku.ca
Please fill in all the applicable fields below to submit an abstract.
**Abstract Submission Form**

**Healthy Aging: It Takes a Community**

**October 26, 2017**

**York University**

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<td>☐ Public policy for healthy aging</td>
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(Individual oral papers are typically 15 – 20 minutes in length, and are submitted by the lead or presenting author. Individual oral papers will be grouped by the conferring organizers into session with 2 – 3 similar other papers.)

**Title of Abstract:**

**Presenting Author(s) (name and Contact information):**

**Authors (Please indicate degrees and affiliations):**

Is the presenting Author a student?  ☐ Yes  ☐ No

Please note that proof of student status will be required during the registration process.
Title of Abstract:

Abstract (300 word limit):