# COUCHPOINTS

NURSING NEWS | FALL/WINTER 2025

#### TOUCHPOINTS 2025 FALL/WINTER

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#### **TOUCHPOINTS**

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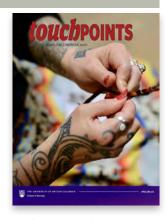
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Read the 2024 UBC Nursing Annual Report



On the Cover: Cedar weaving at the Musqueam Welcome event. Photo by Caterina Marra.

#### **DIRECTOR'S MESSAGE**



The School of Nursing is moving! As this message is being written, boxes are being filled, old books are being traded, unneeded files shredded, outdated tech wiped, shelves emptied and dusty manuals recycled. We are uncovering memories of days gone by, and weighing whether the item discovered in the back of the drawer still

"brings us joy" or is begging to be repurposed. As we label our boxes and begin to say goodbye to a space the school has occupied for 45 years, we look forward to discovering our new desks on the fourth and fifth floors of the new Gateway Health building at the corner of Wesbrook Mall and University Boulevard. By the time this issue is released, we will be moved in and unpacking those boxes!

We know there will be more to do before the space is functioning to its full potential, but just as our Nurse Practitioner teachers and learners have demonstrated when they swiftly made Surrey Centre 1 their home, we are a resilient group ready for a challenge, and already anticipating the day we can welcome you to Gateway Health Building and show you around!

We are particularly excited about our Gateway Team-Based Care Teaching Clinic, which is funded by the Ministry of Health and will be preparing to accept patients in early summer (story on p. 14).

As this issue will show, we have not been entirely focussed on this transition, but have continued our annual traditions of hosting the Vancouver Summer Program (p 18), presenting the Marion Woodward Lecture (p. 4/5), celebrating with our November graduates (p. 7) and upholding the work of our students (p. 19) PSI Scholars (p. 6), and faculty (p. 13).

We are also looking ahead to the Nursing Gala at the Jack Poole Hall in the Robert Lee Alumni Centre just down the block from our new building on May 5, 2026 at 5:30. I hope you will save the date and join us to celebrate. Please enjoy this issue and accept my best wishes for a peaceful, joyous and healthy new year.

Elizabeth Saewyc, PhD, RN, FSAHM, FCAHS, FAAN, FCAN Professor & Distinguished University Scholar Director, School of Nursing

#### **Bits and Bytes**

#### **VIDEO:**

**Ash Scott,** Associate Professor of Teaching, has produced a video with UBC Studios through the Emerging Media Lab (EML), to highlight the Al-Enhanced VR Simulation project. In consultation with Professor Scott, EML worked on the technical development of the program, which is designed to support NP students in practicing clinical consultations. <u>Watch the video</u> on LEARN Lab's (Leadership, Excellence & Research in Nursing Education) highlighted projects page.



#### **PODCAST:**

**Dr. John Oliffe**, professor and founder of the Men's Health Research program, talks with hosts Carol and Jeevan about **What helps men ask for help** on the UBC podcast *From Here Forward*.

#### **BOOKS:**

Professor Emeritus **Dr. Sally Thorne'**s book is available digitally. If an e-version is what you're looking for, <u>click here</u> for the Open Access version of *Interpretive Description: Qualitative Research for Applied Practice*.

Adjunct professor **Corey McAuliffe** considers the question "What if death is not an ending, but a doorway to a more profound connection?" **23 Dates with My Dead Dad** is a grief memoir about love, synchronicity, and continuing bonds beyond death. After losing her father, Corey McAuliffe begins noticing signs that lead her to discover that connection doesn't end with loss. Through grief, illness, and intuition, she learns that love and meaning can deepen in unexpected ways.

Concy Michaelle Colembra Will

Available via: IngramSpark • FriesenPress Bookstore (Release date January 23, 2026)

# The Future of Nursing in the Age of Al

#### **Marion Woodward Lecture**

**Dr. Charlene Chu**, Associate Professor at the University of Toronto and our 57th Marion Woodward Lecturer, spoke on October 16, 2025 at the Vancouver International Film Festival Theatre. The hybrid event was attended by 140 in-person guests and 180 online attendees. In her keynote speech, *The Future of Nursing in the Age of AI*, Dr. Chu addressed how Artificial Intelligence (AI) is reshaping how nurses practice, learn, and generate new knowledge. She opened by stating that she would not be



Dr. Charlene Chu at the VIFF

talking about "how Al is going to end humanity," preferring instead to explore the future of nursing with Al by examining practical applications in clinical settings, including patient monitoring. She also considered the profound implications Al holds for nursing education—how we teach and what we teach in an increasingly digital environment.

Through her talk, Dr. Chu demonstrated that the benefits of AI are manifold, but interlaced

with cautions. For example, she highlighted the consequences of using Al to enhance learning and complete tasks, both for students and clinicians, by citing the MIT study where three groups of students wrote an essay: one group used Chat GPT, one group was assisted by Google, and the last group used their brain only. Minutes after handing in their essays, the "Chat GPT group" could not recall what was in their essay. Using EEGs to review the connectivity in the brain, researchers found that the "brain only group" showed the most connectivity and activity in their brain scans, even three months later. Similarly, in another study, clinicians who had become reliant on Al were unable to diagnose and detect at the same rate without it.

Given the topic, we thought it would be interesting, appropriate, and a little bit meta to ask ChatGPT (GPT-5 Mini), an AI language model, to scan the transcript of this lecture and provide 200 to 250 words that focus on Dr. Chu's thoughts about AI bias and the implications of AI for nursing practice. This exercise highlights how AI can support research, education, and clinical nursing practice, as long as nurses remain the ones in control of how, where, and why it is used in health and education settings.

This fascinating lecture, made possible through the support of The Mr. and Mrs. P.A. Woodward's Foundation, is available in full on <u>Youtube</u>.

#### Nursing, AI, and the Challenge of Bias

THIS PULLOUT WAS DRAFTED WITH THE ASSISTANCE OF CHATGPT (GPT-5 MINI).

As artificial intelligence (AI) becomes increasingly integrated into healthcare, nurses play a critical role in ensuring these technologies are ethical, inclusive, and patient-centered. Research shows that AI systems often perpetuate bias, particularly against older adults. For example, major facial recognition datasets contained only 0.001% images of older adults, and clinical trial data frequently excludes this population, even when the conditions studied primarily affect them. This "digital ageism" can result in AI tools that overlook or misinterpret the needs of older patients, creating disparities in care.

Nurses bring a unique perspective to this challenge. With their deep understanding of patient context, relational care, and ethical responsibility, they are well positioned to identify bias, co-design inclusive AI tools, and advocate for safe implementation. Nursing research has demonstrated the power of combining AI with patient-centered monitoring—tracking mobility, sleep, and social engagement—to enhance care for older adults while protecting privacy.

#### IMPLICATIONS FOR NURSING PRACTICE, RESEARCH, AND EDUCATION

- Research: Lead Al studies to ensure ethical, inclusive, and patient-centered approaches.
- Education: Guide students in using Al responsibly, fostering critical thinking alongside technological proficiency.
- Practice: Advocate for fairness, safety, and equity in Al applications, maintaining human empathy and relational care.
- Policy & Leadership: Shape AI system design and governance to humanize technology and safeguard patients.

In the era of AI, nurses remain the cornerstone of compassionate, ethical, and evidence-based care.

#### **Symposium**

Preceding the Marion Woodward Lecture, **Dr. Emily Jenkins**, Professor and Associate Director of Research, moderated a dialogue on AI with panelists **Dr. Charlene Chu**, Associate Professor in the Faculty of Nursing at the University of Toronto, **Dr. Bernie Garrett**, and **Dr. Lillian Hung**, Associate Professors, and **Ash Scott**, Associate Professor of Teaching all at UBC Nursing. The symposium is an insightful look into how researchers and educators are using AI now and what potential they see for the near future. Watch the full Symposium on Youtube.



Dr. Emily Jenkins moderates the afternoon symposium with panelists Dr. Bernie Garrett, Dr. Lillian Hung, and Ash Scott, with Dr. Charlene Chu of the University of Toronto









Attendees enjoy refreshments and discussion between events.









"A lot of people think AI is going to save the world...solve the climate issue, have boundless amounts of energy, cure every cancer...and I think that's a myth."

~ Dr. Charlene Chu

"The biggest myth is probably that AI understands the world like we do, because it doesn't. It mimics human intelligence and cognitive processes, but it doesn't understand the world."

~ Dr. Bernie Garrett

"None of these tools are capable of doing anything on their own without us validating them first, which is a really important part of the work that everybody's doing."

~ Ash Scott

"We need to understand that we are human and AI is the tool. So don't just copy and paste whatever the AI says. Be a critical thinker and use the tool to enhance our life and enhance patient care."

~ Dr. Lillian Hung

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## **UBC Public Scholar Initiative Awards**

## **Celebrating the 2025 Nursing Honourees**

The Public Scholar Initiative Awards (PSI) are presented to approximately 30 new students each year from all faculties at UBC. The award is intended "to build connections, community, and capacity for doctoral students who are interested in explicitly linking their doctoral work to an arena of public benefit and integrating broader and more career-relevant forms of scholarship into their doctoral education process." We are extremely proud of this year's cohort of PSI Scholars from the School of Nursing.

Click on a name for full profiles or for all UBC profiles, click here: <a href="https://www.grad.ubc.ca/psi/profiles">https://www.grad.ubc.ca/psi/profiles</a>



**Hermandeep Deo** 

Navigating Pain and Performance: A Critical Discourse Analysis of Racialized Women's Illness Narratives

Supervisors: <u>Dr. Lydia Wytenbroek</u> & <u>Dr. Helen</u> <u>Brown</u> Being a Public Scholar means doing research with tangible impact. For me, that starts with real-world problems identified by those directly affected, and then drawing on the literature to explore them in depth. My work emphasizes collaboration and reciprocity by integrating complex concepts and social structures into practical, accessible forms of knowledge that spark dialogue and help change systems.



**Olivia Maracle** 

Home-Away-From-Home (A Missing): Indigenous Nurse Identity And Belonging Supervisor: <u>Dr. Helen Brown</u> To be a Public Scholar is to continue on with a great community of BIG IDEA creatives who build their O\*W\*N box, filling it with a confetti of hues like activism, social justice and imagination —all tools with which to uplift and support my much loved community of relations.



**Shams Al-Anzi** 

Digital Engagement and Mental Health Among West Asian, Middle Eastern & North African Young People in British Columbia

Supervisor: <u>Dr. Elizabeth Saewyc</u>

Being a Public Scholar implies using my academic training to create meaningful change beyond university walls. It is a commitment to making knowledge accessible, actionable and co-owned by the communities it is meant to serve. As a hijabi Muslim woman and immigrant to Canada, I see public scholarship as a responsibility to challenge inequities, amplify marginalized voices and co-create spaces where lived experiences are valued alongside academic expertise.



**Margaret Lin** 

Co-Designing Better Care: Learning with Diverse Voices to Shape Integrated Older Adult Care

Supervisors: <u>Dr. Lillian Hung</u> & <u>Dr. Alison</u> <u>Phinney</u> Being a Public Scholar means being a facilitator and advocate —someone who collaborates with diverse partners, values multiple forms of knowledge and bridges research and practice to co-create meaningful outcomes. In my work across the health system and research, I've partnered with community members, clinicians, policymakers and older adults to co-develop care that truly matters to them. I've seen firsthand how mutual understanding and knowledge sharing lead to better outcomes.



**Connie Clark** 

Newly graduated nurse transition

Supervisor: <u>Dr. Sandra Lauck</u>

I hope my work contributes to the public good by addressing the urgent issue of nursing workforce sustainability in British Columbia. Nurses are essential to delivering timely and effective care, yet high attrition rates among newly graduated nurses threaten the stability of the system. By generating evidence to better support new nurses in their transition to practice, my research aims to strengthen the workforce and, in turn, improve health care delivery for the public.

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# **November Graduation**

#### **The Future Starts Now**

On November 27, 2025, students gathered with families, faculty and staff to celebrate graduating to the next phase of their nursing and academic careers. After observing formal ceremonies at the Chan Centre, additional Nursing awards and accolades were delivered at the graduation reception held at the UBC Golf Club.

## **Convocation**











# Reception











Excellence in MSN Thesis Award: Mohadeseh Saki



Excellence in MN-NP Primary
Care Project Award: Jac
Scodellaro



Outstanding Academic Achievement Award for an MN-NP Graduating Student: Carleigh Prasloski

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# **Indigenous Nursing Community**

## Welcome at the Musqueam Cultural Centre

This October, the Indigenous Cultural Safety (ICS) Committee at the UBC School of Nursing hosted its Indigenous Nursing Community Welcome at the Musqueam Cultural Centre—marking UBC Nursing's first gathering on the current-day Musqueam reserve, part of the Nation's broader traditional and unceded territory that now encompasses the UBC Point Grey campus.

The Welcome event brought together Indigenous students and alumni, faculty, staff, and community partners to celebrate the beginning of the academic year in a space of learning, connection, and cultural grounding. The day's programming was planned by **Elder Art**, **Elder Thelma**, and **Knowledge Keeper Felecia** of the **Stogan Family**, whose guidance and generosity rooted the day in relational learning and Musqueam ways of knowing.



This baby-friendly gathering included a bone game introduced by Kevin Seward.

From braiding cedar bracelets to touring Musqueam territory, the day offered an immersive experience that engaged participants in hands-on cultural practices while providing an important space for dialogue and connections. The Welcome gathering this year marks another key step towards forming the School's Indigenous Nursing Collective—an intergenerational circle of support for Indigenous nursing students and alumni along the path of nursing education and practice.

The gathering also honoured the memory of **Chris Charles**, a former Indigenous BSN student whose words continue to guide our community: "Indigenous students need to be welcomed in a

good way." In this spirit, the ICS committee invited Chris's family and friends to join in the Welcome, and the community acknowledged his lasting impact and the warmth he brought to the UBC Indigenous nursing community. Those who wish to continue Chris's legacy are invited to contribute to the Christopher Charles Memorial Award in Nursing.









Christie Charles guides participants in visiting points of interest on the Musqueam territory and acts as docent at the Musqueam Cultural Centre Gallery.

# **Apology and Action:**

#### Tania Dick is Presented with the Bread & Roses Award

The Canadian Federation of Nurses Unions (CFNU) awarded <u>Tania</u> <u>Dick</u>, Adjunct Professor and Strategic Advisor in Nursing and Indigenous Health at UBC School of Nursing (Vancouver), a Bread & Roses Award in June 2025 for her outstanding contribution to guiding the creation of the CFNU National Apology to Indigenous Peoples.

The CFNU, Canada's largest nurses' organization, issued a National Apology "to Indigenous Peoples who suffered harm due to lack of health care, unethical care and lack of advocacy by nurses for their health needs, and ongoing racism in health care today" on behalf of its members in June 2025. Linda Silas, CFNU President, notes that nurses have been silent on the harms that Indigenous Peoples have experienced within the healthcare system. The National Apology recounts a long history of ongoing harms experienced by Indigenous Peoples, including substandard and segregated care, withholding of care, forced sterilizations and inequitable care. The CFNU explicitly notes the nursing profession's role in perpetuating these harms.

As the CNFU notes, reconciliation is rooted in apology:

Indigenous Peoples deserve to be heard and respected; they deserve the very best care possible in hospitals, clinics and long-term care. Indigenous Peoples deserve to feel safe in our care, and to trust that nurses are effective advocates for them. Instead, Canada and the health care system did harm to Indigenous Peoples, and we need to apologize to Indigenous Peoples for our part. As nurses, we must face our past with honesty and humility. This is truth that must come before meaningful reconciliation.

CFNU, National Apology

The CNFU concludes: "An apology is only one step. It must be followed by action" (CFNU, National Apology). Nurses have a duty to confront systemic and interpersonal racism within the profession and the broader healthcare system.

#### Reflection

Indigenous People deserve excellent care by nurses. How can you join the work of reconciliation? In our ongoing efforts to work towards reconciliation, what does truth, responsibility and accountability mean to you?

#### **Further Your Knowledge**

Learn more about the CFNU's path to an apology <u>here</u>. The full apology can be found <u>here</u>.



Tania Dick, Strategic Advisor in Nursing and Indigenous Health at the UBC School of Nursing.

#### **Bread & Roses Award**

The Bread & Roses Award is presented each year for outstanding contributions to health care policy and decision-making, and for raising public awareness of nursing issues and patient advocacy. The Bread & Roses Award is named in honour of the pioneers in the fight for women's suffrage and women's workplace rights and dignity. The phrase is often associated with a textile workers' strike in Lawrence (Massachusetts) in 1912, in which the strikers demanded: "Give us bread, but give us roses too." The award was presented by CFNU President Linda Silas at the national CNFU biennial convention.

Tania Dick, RN, MN is a renowned Indigenous health care leader and a proud member of the Dzawada'enuxw First Nations of Kingcome Inlet, BC. In her work with unions, government and the education system, her decades of advocacy has helped to address anti-Indigenous racism in the nursing profession and the medical system at large. She continues to be a powerful force behind creating positive change for Indigenous patients and nurses.

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# **Welcoming Meaghan Thumath**

## Presidents Academic Excellence Initiative (PAEI) in Public Health Nursing

Dr. Meaghan Thumath is an internationally experienced public health nurse appointed to a UBC President's Academic Excellence Initiative (PAEI) with a focus in public health emergencies. An adjunct for many years, she accepted a role as Assistant Professor this year. We asked her to tell us something we can't find on her profile page.

When not at UBC, I'm usually found exploring BC with my family (two sons, questionable rescue dog Leo and husband) or dragging my friends to concerts or art shows. My work has taken me from the Downtown Eastside to WHO and Red Cross emergency deployments in South Sudan, the DRC, and Ukraine—experiences that continue to shape my passion for improving health equity during public health emergencies. I love conversations that bridge worlds: between science and storytelling, technology and ethics, policy and lived experience. At UBC, I'm inspired daily by colleagues and students who share a commitment to reimagining what equitable public health can look like in practice. Outside of work, I recharge with music, politics, pilates and a good book—currently Octavia Butler's Parable of the Sower—and I remain convinced that most problems can be solved over food, laughter, or a long walk in the endowment lands.







Dr. Thumath with colleagues in venues around the world.

The President's Academic Excellence Initiative (PAEI) is aimed at extending and enhancing the research impact of the University of British Columbia. It promotes hiring additional research professors, and it offers professional and personal supports to assist new hires in their intellectual leadership.

In January 2020, the Faculty of Applied Science (APSC) at UBC launched a bold strategic plan, aiming to integrate its diverse disciplines to address six key priority areas. APSC has chosen to leverage its PAEI positions to enhance expertise in "Thriving, Resilient Cities & Communities," fostering broad collaboration across the university and external partners.

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# **Introducing Stephanie Van Haute**

# **UBC-Providence Health Care Professorship in Indigenous Cultural Safety and Nursing**



Stephanie Van Haute is a Red River Métis nurse, educator, and emerging scholar whose work bridges community-led Indigenous wellness and nursing education. An Acting Assistant Professor at the UBC School of Nursing and a PhD candidate, she brings more than two decades of clinical and leadership experience, including global health work with Médecins Sans Frontières and roles supporting Indigenous health in Manitoba. Her teaching and research centre on Indigenous cultural safety, anti-racist practice, and transforming health systems through Indigenous ways of knowing. With a background spanning acute care, HIV services, community health, and pandemic response, she is recognized for advancing equity-focused, relationship-based approaches to care. At UBC, she contributes to shaping a generation of nurses committed to reconciliation and decolonizing practice.

I am a daughter, sister, friend and comrade to a diverse group of disrupters, dreamers, artists and builders. As a helper for traditional ceremonies in Manitoba, these many community commitments help me to walk in balance and allow me to carry forward teachings and Indigenous ways of knowing, being and doing into my scholarship. I have practiced yoga and meditation for the past 25 years and am always in awe of the gifts that come from being fully present. I understand things from a spiritual perspective first and use that gift to understand and disrupt historical and ongoing





colonial oppression, indoctrination and support subsequent Indigenous resistance. I am a recent transplant from Treaty One territory and have begun to make a home for myself and my two GIANT dogs- Danu and Zorro on the North Shore. We have had the pleasure of getting to know the spirits and caretakers of these lands and waters since arriving here last summer. I have a love for travel and adventure and have lived and worked in roughly seven countries and have travelled to many more. What I have found, is the universality of love, joy and connection at the centre of every community I have visited, and have come to understand those tenets as core to the human experience.





The role of UBC-Providence Health Care Professorship in Indigenous Cultural Safety and Nursing is a joint initiative to foster systems facing research with a focus on Truth and Reconciliation, promoting Indigenous health equity and improving care experiences of Indigenous patients and their families within Western health systems.



Above: Danu and Zorro; top left: Stephanie displays her ribbon skirt at the Musqueam Community Centre; other photos: Stephanie in Churchill.



Signs of the climate crisis are all around us, as annual temperatures soar, breaking records across BC and around the world, while forest fires intensify, forcing evacuations of thousands, and negatively impacting air quality and health. The World Health Organization estimates that in the coming decades, climate change will cause approximately 250,000 additional deaths per year, and the economic costs of climate change-related weather disasters grew to \$8.5 billion in 2024.

As clinicians, educators and advocates, nurses have numerous natural entry points into addressing the climate crisis. We asked six members of the wide community of UBC School of Nursing about the work they are leading to promote planetary health. Each of them approaches planetary health from a different angle, and we hope you'll find their work as interesting and inspiring as we did!

Below are parts of our conversations with **Dr. Jennifer Baumbusch**, Professor; **Kaitlin Bloemberg**, Instructor; **Zach Daly**, PhD student; and **Raluca Radu**, Adjunct Professor; all of the School of Nursing UBCV and **Dr. Maya Kalogirou** Assistant Professor, University of Alberta and **Dr. Shahin Kassam**, Assistant Professor, School of Nursing UBCO. Their postdoctoral fellowships with the School ended in December 2024 and August 2025 respectively.

We first asked our interviewees to describe the ways they have championed planetary health or advocated for action on the climate crisis. Dr. Baumbusch explained that after the 2021 heat dome, she was inspired to start a research program focused on health equity and climate change, specifically seeking to "foster climate resilience in groups that are more vulnerable to the impacts of climate change, specifically older adults and people with disabilities." Ms. Radu outlined her experience teaching planetary health to undergraduate nursing students at UBC, which led to her current role as the inaugural Planetary Health Leader at Providence Health Care, where she co-leads the development of the organization's first planetary health strategy and works to develop work plans that will expand low-carbon, high quality patient care. Dr. Kalogirou is interested in exploring how we can decarbonize our health care system and mobilize health care professionals to be leaders in this area. As the current president for the Canadian Association of Nurses for the Environment (CANE), Dr. Kalogirou has championed planetary health through publications, media interviews, and by working with the Canadian Nurses Association and many other health care organizations in an attempt to broaden the reach of planetary health promotion messages. Dr. Kassam's work highlights how women living with forced migration statuses are disparately affected by climate change-induced health impacts, and she seeks to apply intersectional environmentalism within planetary health education, to provide "practical strategies for educators to consider in contributing to the axes of nursing and climate action." Ms. Bloemberg integrates planetary health into her clinical practice, extracurricular work, and teaching. During her MSN studies at UBC, she focused on mitigating the health impacts of extreme heat events on vulnerable populations

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and created toolkits to help people prepare for extreme heat. She notes, "My goal is to help people see climate action not just as an environmental issue, but as an imminent health and mental health priority." Mr. Daly's PhD research is on the mental health impacts of climate change on youth, and he notes, "My hope is that my work can, in a small way at least, result in a health system better able to support people with the impacts of climate change on their mental health."

Our interviewees identified an imperative to take planetary health action grounded in nursing values, and they offered the following advice. Dr. Kalogirou implored "Be brave, get involved, and keep going" while Dr. Baumbusch noted, "you can begin your work from right where you are." Ms. Radu suggested using the Planetary Health Education Framework to help transform nursing education and align with global initiatives. To Mr. Daly, "Planetary health is absolutely a nursing issue", while Dr. Kassam and Ms. Bloemberg emphasise the need for action grounded in core nursing values to advance equity, and advocate for justice. Dr. Kassam states, "Nurses are knowledgeable, trusted leaders in addressing planetary health crises."

Each interviewee described the steps they took toward action. Dr. Baumbusch's first step was "identifying the relevance of planetary health to practice and scholarship" while Ms. Radu suggests "identifying one area of environmental concern that you are passionate about, e.g. reducing the healthcare system's carbon

footprint" and taking action in that area. Ms. Bloemberg reminds us to identify and stay connected to our "why" when taking climate action and describes how she does this by "spending a lot of time in natural spaces, falling in love with the land and feeling a sense of connection" which grounds her, and emphasizes the importance of fighting for planetary health. Dr. Kalogirou outlines the next steps to action: "read as much as you can and learn to talk about it with others," and join groups like CANE who provide educational resources, and opportunities to engage in action locally and nationally. Mr. Daly encourages us to "find nurses and allied health staff who are passionate about planetary health and work alongside them to take collective action." Dr. Kassam notes the importance of building community partnerships and seeking to understand how these partners are understanding planetary health and enacting climate advocacy.

Our interviewees strongly recommend seeking support, mentorship, finding peers and allies, within the School of Nursing, through CANE and other organisations, noting that collaboration sustains engagement, prevents burnout, supports coping with difficult emotions, and fosters joy and hope. In taking collaborative action, interviewees suggest engaging with <a href="UBC Sustainability">UBC Sustainability</a> Action, Green Teams, stewardship groups, and CANE.

We are proud to call these six nurses our colleagues and hope their stories have moved you to join the movement to use our nursing voices to promote planetary health.

# **Gateway Team-Based Teaching Clinic**

## A New Chapter for Nursing and Interprofessional Education

For the School of Nursing, the Gateway Team-Based Care Teaching Clinic (Gateway Clinic) represents a major step forward in shaping how future nurses learn, lead, and collaborate in primary care. Opening in mid-2026 with assistant professor of teaching **Dr. Julie Tipping** as program director, Gateway Clinic is designed as an innovative clinical environment where students, clinician educators and researchers work together to model what high-functioning, team-based primary care can look like across British Columbia. With funding from the Ministry of Health, the School of Nursing is the administrative home to this unique collaboration.

What sets Gateway Clinic apart is its integration within UBC itself. This unique positioning allows nursing students (both RNs and NPs) and faculty to work side-by-side with colleagues from dietetics, clinical kinesiology, family practice, occupational therapy, pharmacy, physical therapy, and social work. The result is a truly interprofessional learning environment to inspire the real-world settings where teams are increasingly needed.

For nursing, the vision of Gateway Clinic aligns perfectly with the School's longstanding commitment to collaborative, personcentred care. The clinic's first core pillar is **Collaborative Interprofessional Health Education**, which builds capacity for students to learn how team-based care is delivered, practiced, and refined. Undergraduate and graduate nursing learners will gain hands-on experience in clinical decision-making as part of an interprofessional team, developing a deep appreciation for the strengths and perspectives each discipline contributes. With supervision and mentorship from experienced practitioners, students will graduate with the skills, confidence, and values needed to thrive in team-based environments.

The second pillar is **Interdisciplinary Evaluation**, **Research**, and **Knowledge Exchange**. This will give nursing researchers and students opportunities to help shape the future of primary care education. Gateway Clinic will function as a hub where evidence-informed practices are developed, tested, and shared. For nursing faculty, this means new space for applied research, quality improvement projects, and collaborations that advance team-based care. For students, it creates a living laboratory where scholarly inquiry and clinical practice intersect.

**Delivery of Team-Based Primary Care** is the third pillar, offering an essential service to Vancouver residents as their new primary care providers, while giving learners rich, real-world experience. Patients will receive coordinated care from a diverse clinical team, supported to take an active role in their health. The clinic will offer both virtual and in-person services, preparing nursing students to navigate the full continuum of contemporary primary care delivery.

Gateway Clinic's model is grounded in strong research, demonstrating that interprofessional education improves both practitioner readiness and patient outcomes. As a teaching clinic, it will provide longitudinal, team-based primary care while maintaining an explicit focus on learning. This multi-faceted commitment to education, clinical excellence, and community well-being positions Gateway Clinic as a scalable model for primary care delivery across the province.

Ultimately, Gateway Clinic represents a new space where nursing leadership, scholarship, and patient-centred care come together. It is a place where students will learn what it truly means to practice as part of a collaborative team, and where the School of Nursing will help shape the future of primary care in British Columbia.



## **ECG Micro-credential for NPs**

## **New Nursing ECG Program Strengthens Clinical Preparedness**

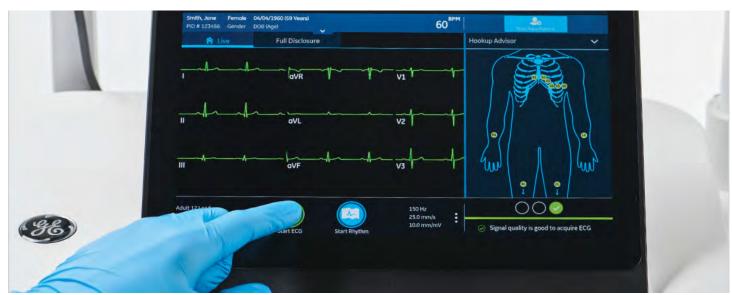


This year marks the launch of the School of Nursing's new ECG program, a timely and essential addition to our clinical education offerings developed by **Dr. Nassim Adhami**. As healthcare grows increasingly technology-driven, nurses must be confident not only in operating diagnostic equipment but also in interpreting the data it produces. Electrocardiograms (ECGs) are a cornerstone of both primary and acute care, yet many clinicians receive limited formal training in reading and responding to ECG findings.

Our new part-time, hybrid ECG course is designed to fill that gap. Developed in close consultation with Nurse Practitioner leaders from Providence Health and Fraser Health, as well as an expert

cardiologist, the program equips learners with a strong foundation in cardiac anatomy, physiology, and the electrical conduction system. Participants will gain hands-on experience performing accurate 12-lead ECGs, troubleshooting common waveform errors, and distinguishing normal rhythms from common dysrhythmias. The emphasis is on building the practical skills and clinical judgment needed for safe, timely, and high-quality patient care.

The program will be delivered in our new facility, featuring stateof-the-art equipment that mirrors real-world practice. A formal announcement from the Ministry of Education is expected in the coming months.





These represent a sample of the many awards and other accolades received by faculty, emeriti and adjuncts since July 2025. For more, please visit our "News" and "Our People" webpages at <a href="https://nursing.ubc.ca">nursing.ubc.ca</a>.



**Melanie Basso** | Canadian Nursing Association Order of Merit Award

Marlene Burrows | Co-leader of the Western Northwestern Region of the Canadian Association of Schools of Nursing (WNRCASN)





Leanne Currie | Promoted to Professor effective July 1, 2025

Saima Hirani | Co-leader of the Western Northwestern Region of the Canadian Association of Schools of Nursing (WNRCASN)





**Emily Jenkins | Youth Health Award from McCreary Centre Society** 

**Lydia Wytenbroek** | President of the Canadian Association for the History of Nursing (CAHN)





Sandeep Dhillon | Michael Smith Health Research BC Trainee Postdoctoral Supervisor: Dr. Kristen Haase

Lara Hudspith | Michael Smith Health Research BC Trainee
Postdoctoral Supervisor: Dr. Vicky Bungay

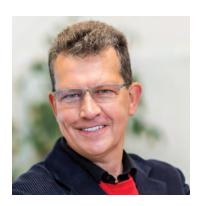




**Kelsey Timler | Michael Smith Health Research BC Trainee**Postdoctoral Supervisors: Dr. Helen Brown and Dr. Michelle Stack

# **Celebrating Bernie Garrett:**

## **Innovation and Insight in Nursing Education**



When **Dr. Bernie Garrett** arrived at the UBC School of Nursing in 2003, he brought with him a blend of clinical expertise, technical curiosity, and a disarming British sense of humour that would become part of his signature as an educator. Over the next two decades, his expertise in technologies from early computer-assisted haemofiltration to virtual

reality would help shape the school's digital transformation, champion critical thinking in nursing education, and explore how emerging technologies could deepen, rather than diminish, compassionate care.

His path to innovation began in a renal unit in the UK where he found the combination of "acute-care and long-term care in the same unit" offered the kind of challenge he thrived on: highly technical care, rapid decision-making, and the responsibility of managing "our own renal ICU within the unit." As a nurse, he relished the opportunity to develop long-standing relationships with patients and also witness the dramatic success of transplantation.

Those early years also exposed him to the leading edge of clinical computing. Working in one of the first renal units to use computers to control healthcare devices, he and his colleagues often built their own equipment—BBC computers, electronic scales, haemofilters, and IV pumps linked together to manage fluid balance before commercial solutions existed. This tinkerer's environment was formative. The hands-on experience fed an emerging fascination with digital systems, eventually leading to a PhD in Computer Science and a career-long exploration of how technology intersects with clinical practice, learning, and human experience.

That intersection is visible in his work with virtual reality in pain management, a collaboration with Dr. Tarnia Taverner. Although he notes he "isn't a pain expert," he brought the technological foundation that helped the project grow. For Dr. Garrett, the idea that technology and compassionate care sit on opposite sides of a divide has always been a misunderstanding. "There is always a person at the end of the machine," he says. "Technology simply represents tools we can use to provide compassionate care—be they bandages, communication tools, or computers." Used wisely, technology extends human capacity; misused, it introduces new ethical challenges, a theme that threads through much of his more recent research.

This line of inquiry shaped his work on health deception and misinformation, an area increasingly urgent in the face of antiscience movements and the rapid spread of unreliable health content on social media. He became concerned not only about public understanding of science but also about its influence on nursing students' critical thinking. A 2017 study with his team revealed that large proportions of final-year nursing

students believed in communication with the dead or the reality of witchcraft. These findings underscored, for him, the need to strengthen scientific literacy within the profession. His research in this area has been widely discussed, occasionally controversial, and undeniably influential.

One of his most enduring contributions at the School is PeP, the electronic portfolio system introduced in 2009 to track students' clinical progress. Retired only last year, "it outlasted my wildest expectations," Dr. Garrett says, attributing its staying power to its usefulness and the absence of comparable alternatives for many years.

During his time as Associate Director, Undergraduate Studies, he also played a major role in establishing the Clinical Placement Practice Unit and in designing standardized syllabi.

Teaching, however, remains at the heart of what he will miss most. He speaks with warmth about his time in the classroom (less so about marking) and about the creativity and energy students bring. Education, he believes, should be enjoyable as well as rigorous. The explosion of digital technologies over the last twenty-five years, and particularly the shift to live online teaching, has transformed the experience for instructors and students alike. The next major leap, he predicts, will come from artificial intelligence, a revolution he believes will be as profound as the arrival of the internet. As always, he reminds us that technologies bring both opportunity and risk. The challenge ahead lies in how wisely they are used.

Looking back, his list of accomplishments is long: becoming a founding Fellow of the Canadian Nurse Educators Institute; contributing to the widely used *Clinical Pocket Reference* (with over 100,000 copies sold); guiding his PhD students; and helping shape research ethics practices around technology through the Behavioural Research Ethics Board. But the work on health deception, he says, has been "particularly gratifying," both for its impact and its relevance to today's healthcare landscape.

As he approaches retirement, he looks forward to a new rhythm; one that involves building a small aircraft in his garage on a tiny island, travelling more, and improving his guitar skills. He will remain connected to the School as an Emeritus Professor and is eager to see how the community flourishes within its nearly completed new home, the Gateway Health building. As Associate Director of Infrastructure and Technology, he oversaw development of the state-of-the-art facility. Adorned with Indigenous artwork and surrounded by natural landscaping, it represents for him a new era for the School of Nursing, "delivered on time and under budget...almost." Ah, yes, there's that dry British wit.

Dr. Garrett leaves behind a legacy defined by intellectual curiosity, technical innovation, and a deeply human commitment to education. His work reminds us that technology in nursing is not an end in itself but a means to better care, clearer thinking, and stronger relationships. His influence will continue to shape the school and the nurses it graduates for many years to come.

# **Vancouver Summer Program 2025**

## **International Students Learn and Explore Together**

The 2025 VSP ran from July 11 to Aug 11, 2025. The School hosted 34 students from Hong Kong, China, Singapore, Taiwan and South Korea. In 2025 we offered two packages: Senior's Health and Home Care, and Mental Health and Awareness. In 2026 we will be reintroducing Package C: Global Leadership: Health Equity and Climate Resilience. International students are invited to check our website for details on the application process for 2026.



















nursing.ubc.ca/international-learning

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## **Student Life**

## **Projects and Presentations**

Our NURS 300 students (Theoretical and Professional Foundations for Nursing Practice) enjoy a reprieve from their academic routine. Below, a few students take transit to the VIFF Theatre for the Symposium and Marion Woodward Lecture on October 16, 2025. After the dialogue, they gather around their professor, **Dr. Lydia Wytenbroek**, for a group photo.



Below, one of several NURS 300 student groups pose in front of their "Un-Essay" project. The opportunity to present their work to fellow students and faculty was one of the final events that Nursing hosted in Koerner Pavilion. Select projects from the November event are being curated for online viewing on the Nursing Student Showcase website: <a href="mailto:blogs.ubc.ca/showcase/nurs-300/">blogs.ubc.ca/showcase/nurs-300/</a>





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