



Nursing Informatics IS Nursing L'informatique infirmière EST la pratique infirmière

2019 CNIA Conference
Co-hosted by
Canadian Nursing Informatics Association,
New Brunswick Nursing Informatics Group &
Nova Scotia Nursing Informatics Group



FREDERICTON, NEW BRUNSWICK

JUNE 13 & 14, 2019

University of New Brunswick
33 Dineen Dr. Fredericton, NB

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Acknowledgement

We would like to acknowledge that this conference is located on unceded Indigenous territory of the Wolastoqiyik (Maliseet) and Mi'kmaq peoples.

On Behalf of the Conference Planning Committee, we would like to welcome you to Fredericton, New Brunswick, Canada

Co-Chairs: Karen Furlong (NBNIG co-chair), Lynn Nagle (NBNIG co-chair), Glynda Rees (CNIA president-elect), Leanne Rankin (NSNIG co-chair), Mary Eileen MacPhail (NSNIG co-chair)

Planning Committee:

Teresa Baker	Mary Henderson Betkus	Leanne Rankin
Kate Burns	Margie Kennedy	Glynda Rees
Leanne Currie	Mary Eileen MacPhail	Tracie Risling
Diana Dupont	Éric Maillet	Kathy Rush
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Karen Furlong	Connie Munroe	Gillian Strudwick
Michelle Ham	Lynn Nagle	Lisa Totton
Dianne Hart	Sonia Pagliaroli	Peggy White

Wifi: Will be available onsite

Parking: Free parking is available on campus

Welcome Message,

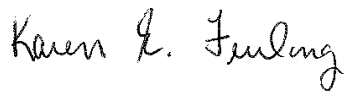
On behalf of CNIA, we thank you for participating in this conference. We hope this conference offers each delegate opportunities to improve their awareness of how Nursing Informatics *IS* Nursing.

Sincerest appreciation to all members of the conference planning committee, their contributions are greatly appreciated. In addition, a huge thank you to conference sponsors and all presenters.

Jurisdictional and national informatics associations/groups will continue their efforts to collaborate with nurses working in diverse and complex settings.

I encourage each delegate to continue to look for opportunities to both contribute and influence the national nursing informatics dialogue.

Best Regards,



Karen E. Furlong, CNIA President



Keynote: Max Topaz, PhD, RN, MA



Keynote Address- Nursing Informatics: Current Trends and New Frontiers Sponsored by Cerner

Dr. Maxim (Max) Topaz PhD, RN, MA is the Elizabeth Standish Gill Associate Professor of Nursing at the Columbia University Medical Center. He is also affiliated with Columbia University Data Science Institute and the Center for Home Care Policy & Research at the Visiting Nurse Service of New York. His research focusses on data science and he finds innovative ways to use the most recent technological breakthroughs, like text or data mining, to improve human health. Dr. Topaz's research moto is "Data for good". Dr. Topaz is one of the pioneers in applying natural language processing on data generated by nurses. His current work focusses on developing natural language processing solutions to advance clinical decision making.

In the past, Dr. Topaz was involved with health policy (national and international levels), leadership (e.g. Chair of the Emerging Professionals Working Group of the International Medical Informatics Association) and health entrepreneurship. Dr. Topaz's clinical experience is in internal and urgent medicine. He earned his PhD degree as a Fulbright Fellow at the University of Pennsylvania and his Master's and Bachelor's degrees from the University of Haifa, Israel. He completed a postdoctoral fellowship at the Harvard Medical School and Brigham Women's Hospital. He served as a Senior Lecturer at the School of Nursing, University of Haifa (Israel) where he was heading a Health Information Technology Lab. He published more than sixty articles on topics related to health informatics and received numerous prestigious awards for his work.

Thursday June 13th - Pre-Conference Activities

0900-1200	Auditorium 53
	Informatics Workshop
1400-1500	Auditorium 53
	NBNIG Meeting
1530-1730	Auditorium 53
	CNIA Annual General Meeting
1730-2000	Rooms 102, 106, 111, 125 (*poster set up)
	Networking Reception: Sponsored by Mustimuhw Information Systems: Breanne Benoit

Friday June 14th

0730	Room 18		
	Indigenous Smudging Ceremony		
0730-0830	Main Floor Entrance		
	Refreshments and Registration		
0830-0900	Auditorium 53		
	Conference Opening & Welcome: Glynda Rees & Karen Furlong Indigenous Traditional Welcome, Shelley Francis Michael Villeneuve, CEO, Canadian Nurses Association		
0900-1000	Keynote Address		
	Sponsored by Cerner: Introduced by Sonia Pagliaroli, CNO, Cerner Canada Dr. Maxim Topaz – Nursing Informatics: Current Trends and New Frontiers		
1000-1015	Networking Break		
1015-1115	Auditorium 53	Room 14	Room 21
	Implementation	AI and Big Data	Decision Support
	1A1: (FRENCH) Implementing clinical integration: lessons learned. <i>By H��l��ne Fregeau</i>	1B1: Representation of Nursing Wound Care in SNOMED CT. <i>By Lorraine Block</i>	1C1: Informing Prevention Through Predictive Analytics. <i>By Lydia Sequeira</i>
	1A2: 24 Standardization for a Regional Clinical Information System. <i>By Elizabeth Nemeth & Terri LeFort</i>	1B2: How AI Will Change Nursing Practice. <i>By Tracie Risling</i>	1C2: Social Media as a Public Health Surveillance Tool. <i>By Megan Meszaros</i>
	1A3: Transforming Public Health Nursing in Nova Scotia. <i>By Margie Kennedy</i>	1B-RF1: Big Data: Why Should Nurses and Nurse Executives Care? <i>By Sally Remus</i>	1C-RF1: Automatically Tasking the Braden Scale to Prevent Hospital Acquired Pressure Injuries. <i>By Lisa Hodgins</i>
	1B-RF2: A Kuhnian Approach to Big Data for Nursing and Nursing Knowledge. <i>By Scott Ramsay</i>	1C-RF2: Evaluating an EMR tool for Primary Care Clinicians. <i>By Abdulai Abdul-Fatawu</i>	
	1B-RF3: National Nursing Data Standards: The Journey. <i>By Lynn Nagle & Peggy White</i>	1C-RF3: Electronic Stethoscope Usage in Telehealth. <i>By Krisan Palmer</i>	
	Moderator: V��ronique Dub��	Moderator: Gillian Strudwick	Moderator: Michelle Ham

RF = Rapid Fire Presentation (5min)

	<i>Auditorium 53</i>		
1120-1245	Open Forum: Nursing Informatics IS Nursing Moderator: Jeffrey Williamson, M. Ed.		
1245-1330	Rooms 102, 106, 111, 125		
	Lunch & Poster Session (posters in Hallway outside room 111)		
1330-1450	Auditorium 53	Room 14	Room 21
	Education	Clinical Practice	Innovation
	2A1: (FRENCH) Efficacy of Serious Games in Healthcare Education. <i>By Marc-André Maheu-Cadotte</i>	2B1: Improving Outcomes with Device Integration. <i>By Meghan Ralston</i>	2C1: The Journey of Building an Online Community for RNs. <i>By Terri Belcourt & Emery Wolfe</i>
	2A2: Digital Health in Canadian Schools of Nursing. <i>By Lynn Nagle</i>	2B2: Developing eCTAS Solution for Ontario Cerner Clients. <i>By Donna Alfaja</i>	2C2: Social Robotics in Simulated Domestic Environments. <i>By Richard Booth</i>
	2A3: Development of an Educational Electronic Health Record. <i>By Glynda Rees</i>	2B3: Real Time Location Systems (RTLS) to Support Clinical Practice. <i>By Sara Lankshear</i>	2C3: Exploring VR as a Clinical Teaching Approach. <i>By Don Leidl</i>
2A4: Medication Errors with eMAR in Clinical Simulation. <i>By Ryan Chan</i>	2B4 (FRENCH) Using a Fully Electronic Health Record: How do we Measure the Impact for Nurses? <i>By Eric Maillet</i>	2C- RF1: Telepremie: Our Care Delivery Experience is Changing. <i>By Krisan Palmer</i>	
		2C-RF2: The Panorama Program Roadmap in Nova Scotia. <i>By Melissa Boland</i>	
	Moderator: Kathy Rush	Moderator: Leanne Currie	Moderator: Peggy White
1450-1500	Networking Break		
1500-1600	Auditorium 53	Room 14	Room 21
	Patients and Families	Patients and Families	Competencies
	3A1: (FRENCH) Supporting Caregivers on the Web: Promising Nursing Interventions. <i>By Véronique Dubé</i>	3B1: Nursing is Essential for ACCESS 2022: But Are We Ready? <i>By Tracie Risling</i>	3C1: Informatics Competencies for Canadian Nurse Leaders. <i>By Gillian Strudwick</i>
	3A2: Osteogenesis Imperfecta Caregivers' Views on IT. <i>By Aimee Castro</i>	3B2: Virtual Atrial Fibrillation Care: Is it Feasible? <i>By Kathy Rush</i>	3C2: Defining Informatics Practice. <i>By Jeffrey Williamson</i>
	3A3 Parents' App Searching Behaviours: A Focus Group Study. <i>By Anila Virani</i>	3B3: (FRENCH) Web Interventions for Seniors: A Literature Review. <i>By Audrey Lavoie</i>	3C-RF1: A Digital Health eResource. <i>By Lynn Nagle, Glynda Rees & Richard Booth</i>
		3C-RF2: Telehealth: A Mobile App for Healthcare. <i>By Krisan Palmer</i>	
	Moderator: Éric Maillet	Moderator: Leanne Currie	Moderator: Michelle Ham
1600-1630	<i>Auditorium 53</i>		
	Closing Session: Dean Lorna Butler & Co-chairs		

RF = Rapid Fire Presentation (5min)

Concurrent Session 1: 1015-1115

Session 1, Room A: Implementation

Implantation de l'intégration clinique d'un déménagement hospitalier : leçons apprises (Implementing Clinical Integration: Lessons Learned). By H  l  ne Fr  geau, RN, B. Sc., Nathalie Folch, Ph.D. Kin  siologie, Axel Van Leeuw, M. Sc. A, MBA, Johanne Gravel, MAP [French presentation]

Le Centre hospitalier de l'Universit   de Montr  al (CHUM) d  m  nagerait trois h  pitaux vers un seul et m  me site. Afin d'  viter de faire partie des statistiques d'  chec, la direction des technologies de l'information et des t  l  communications a confi   le leadership de ses rencontres de gestion    deux cliniciennes. Cette conf  rence pr  sentera le contenu des s  ances d'int  gration clinique et quelques le  ons apprises.

The Centre hospitalier de l'Universit   de Montr  al (CHUM) merged three hospitals to a single site in a new building. In order to avoid being part of failure statistics, the IT Department entrusted the leadership of its management meetings to two clinicians. This conference will present the content of the clinical integration sessions and few lessons learned.

24 Hospital Regional Standardization and Implementation. By Elizabeth Nemeth, Terri LeFort

Nursing Leaders and client providers have an opportunity to improve the quality of care provided by reducing unnecessary variation. However, there still seems to be a gap in the adoption of standards and best practices. Through a case study, the authors will describe a regional approach for clinical standardization in implementing evidence based standardized content.

Transforming Public Health Nursing in Nova Scotia. By Margie Kennedy

In 2017, Nova Scotia commenced an initiative to launch a new public health information system designed supporting inventory management, immunization management, investigation of communicable diseases, and outbreak containment. In Dec 2018, they achieved the Go Live for all core modules, transforming how public health nurses capture, manage, and exchange information.

Session 1, Room B: AI and Big Data

Representation of Nursing Wound Care in SNOMED CT. By Lorraine J. Block, Sabrina T. Wong, Rosa Hart, Shannon Handfield, Leanne M. Currie

The purpose of this presentation is to describe the mapping work between nursing wound assessment data elements and SNOMED CT. We found that nursing wound assessment concepts (N=107) were poorly represented in SNOMED CT (58% no match, 40% direct match, and 2% one-to-many). There is need to increase knowledge representation of nursing wound care in SNOMED CT.

How AI Will Change Nursing Practice. By Tracie Risling, Cydney Low

Artificial intelligence is poised to change nursing practice. But in order for this technology to truly be effective in improving the quality and safety of healthcare, nursing must be prepared to change AI. In this presentation results from a scoping review on AI in health provide an opportunity to discuss what challenges and opportunities lie ahead.

Big Data: Why Should Nurses and Nurse Executives Care? By Sally Remus, Lorie Donelle, Lynn Nagle

In this presentation, a perspective on how the field of data science can enable informatics savvy/proficient nurse leaders to lead clinical transformation in the development of the next generation of EBP, "practice-based evidence" (PBE) which harnesses big data's potential for nurses in all practice domains will be described.

A Kuhnian Approach to Big Data for Nursing and Nursing Knowledge. By Scott Ramsay

By recognizing Kuhn's evolutionary thinking on the development of science and practical examples of big data utilization, nurses can begin to understand the potential benefit big data has for nursing and the importance of participating in the discourse on data science, given the impact for future nursing knowledge, practice, and research.

National Nursing Data Standards: The Journey. By Lynn Nagle & Peggy White.

In 2019 a national meeting of nurse leaders and key stakeholders continued the dialogue to advance the adoption of nursing clinical data standards across Canada. In this presentation, we provide an update on the efforts and progress to date.

Session 1, Room C: Decision Support

Informing Prevention Through Predictive Analytics. By Lydia Sequeira, Gillian Strudwick, Vincenzo DeLuca, Michael Thompson, Colin Chu, Sasanka Are, Douglas McNair, David Wiljer, John Strauss

Predictive algorithms can aid in prevention of complex clinical issues such as suicide. This study presents preliminary results on the external validation of one such algorithm, and discusses challenges that arise from translating algorithms into different environments.

Social Media as a Public Health Surveillance Tool. By Megan Meszaros

The pervasiveness of social media (SM) in today's society is resulting in a rich pool of data that holds significant potential for public health research. As people engage through SM, ideas and views are readily constructed, conveyed, and reinforced. Analysis of the discourses surrounding health issues on SM can serve as a public health surveillance tool.

Automatically Tasking the Braden Scale to Prevent Hospital Acquired Pressure Injuries. By Lisa Hodgins, Jessica Schlegel, Lori Page

Hospital acquired pressure injuries (HAPI) were monitored through regular patient assessment and auditing. A quality improvement initiative consisting of progressive automation of pressure injury assessment reminders served to improve assessment completion and reduce HAPI prevalence.

Evaluating an EMR tool for Primary Care Clinicians. By Abdulai Abdul-Fatawu, Hanieh Shakeri, Natalya Lebedeva, Billy S. Augustine, Leanne Currie, Sabrina Wong.

The use of electronic medical records (EMR) in primary care is widespread across Canada, yet the end user has not been given much consideration in the design. We developed and evaluated an EMR quality assurance tool for primary care clinicians and found that primary care clinicians wanted customizable EMR, transparency of terms, is easy for query and comparison with other clinicians, practices and jurisdictions.

Electronic Stethoscope Usage in Telehealth. By Krisan Palmer

This presentation will demonstrate the flow of a Virtual provincial Cystic Fibrosis clinic as championed by an innovative Respirologist to keep his patients in their home communities and promote clinical knowledge transfer.

Concurrent Session 2: 1330-1430

Session 2, Room A: Education

Résultats d'une revue systématique quant à l'efficacité des jeux vidéo sérieux dans la formation des professionnels de la santé (Efficacy of Serious Games in Healthcare Education). By Marc-André Maheu-Cadotte, Sylvie Cossette, Véronique Dubé, Guillaume Fontaine, Tanya Mailhot, Patrick Lavoie, Andréane Lavallée, Marie-France Deschênes [French presentation]

Les jeux vidéo sérieux sont des logiciels ludiques conçus spécifiquement avec une visée éducative. Alors que l'utilisation des jeux vidéo sérieux dans la formation des professionnels de la santé est en émergence, nous avons réalisé une revue systématique afin d'identifier leur efficacité auprès de ce groupe. Les résultats de ce travail seront présentés lors de cette session.

Serious games (SGs) are interactive digital software with an educational purpose. As their efficacy in supporting engagement and in improving learning outcomes in healthcare education was unknown, we conducted a systematic review focusing on the findings of randomized trials. Results from this review will be presented to attendees during this session.

Digital Health in Canadian Schools of Nursing. By Lynn Nagle, Karen Furlong, Manal Kleib

Findings from a 2018 multi-method study of digital health content and capacity in Canadian schools of nursing will be presented. The study identifies future directions for curricula and faculty capacity development.

Development of an Educational Electronic Health Record. By Glynda Rees, Leanne Currie, Rob Kruger, Janet Morrison

Students graduating in the health sciences will be frontline users of electronic health records and their acceptance, attitudes, and proficiency with these systems are key factors in determining their readiness and safety to practice. This presentation will provide an update on work being done in BC, Canada to develop an interprofessional educational electronic health record.

Medication Errors with eMAR in Clinical Simulation. By Ryan Chan, Richard Booth, Gillian Strudwick, Barbara Sinclair

Medication errors generated within the healthcare setting pose significant risk of harm on patients' health, safety, and well-being. The findings of this study demonstrated that nursing students continue to generate medication errors, of various types and severity, within a simulated learning environment with the use of electronic medication administration record technology.

Session 2, Room B: Clinical Practice

Improving Outcomes with Device Integration. By Meghan Ralston

North York General Hospital has developed a clinical documentation device integration strategy. This presentation will provide an overview of our implementation of bedside medical device integration software and outcomes achieved aimed at enhancing patient quality and safety, improving clinician efficiency and improving patient experience.

Developing eCTAS Solution for Ontario Cerner Clients. By Donna Alfoja, Linna Yang, Carla Moran-Venegas

CancerCare Ontario (CCO) led the deployment of a clinical support tool for the eCTAS Initiative which standardizes the triage assessment of patients that present to Emergency Departments in Ontario. North York General Hospital led the development of a province-wide solution within the EHR (Cerner) that integrates with CCO's eCTAS Web Service.

Real Time Location Systems (RTLS) to Support Clinical Practice, by Jacqueline Limoges

Real Time Location Systems (RTLS) can provide evidence into the enablers and barriers to full optimization of RTLS technologies and how these technologies can shape clinical decision making, professional development and professional practice.

Utilisation d'un dossier clinique entièrement électronique : comment mesurer l'impact pour les infirmières? (Using a Fully Electronic Health Record: How do we measure the Impact for Nurses? By Éric Maillet, Leanne Currie, Gillian Strudwick, Véronique Dubé [French presentation])

Health IT has evolved significantly and some Canadian hospitals are now using a fully electronic health record. The aim of this presentation is to explain the process that led to the proposal of a multidimensional measure of the impact on nursing practice following the adoption and use of a stage 7 EHR.

Les TI en santé ont beaucoup évolué et certains hôpitaux canadiens utilisent désormais un Dossier clinique informatisé entièrement électronique (stade 7). Cette présentation a pour objectif d'expliquer la démarche qui a mené à la proposition d'une mesure multidimensionnelle de l'impact de l'adoption et de l'utilisation d'un DCI entièrement électronique sur la pratique clinique des infirmières.

Session 2, Room C: Innovation

The Journey of Building an Online Community for RNs. By Terri Belcourt, Emery Wolfe

Building a professional online space to connect with colleagues was a need identified by the SRNA. This presentation will take you through the journey of how the SRNA kept the end goal in sight and involved members at every step to develop an online community of practice.

Social Robotics in Simulated Domestic Environments. By Richard Booth, Gillian Strudwick, Josephine McMurray, Ryan Chan, Kelly Taylor, Emily Mallay, Aleah McCormick, Justine Gould, Laura Brennan

Generating simulated opportunities for nursing students to learn and become familiar with social robotics is important. Simulated clinical scenarios exploring future-state human-robotic models of care were developed and studied. The findings suggest that deeper reflection should be provided related to the use of artificial intelligence and robotics in domestic and healthcare settings.

Exploring VR as a Clinical Teaching Approach. By Dr. Don Leidl

With increased demand for clinical placements, nursing education is challenged to identify innovative approaches that ensure student access to the learning opportunities necessary to gain essential nursing competencies. This presentation will introduce the topic of VR technology as a teaching approach and focus on its potential in clinical nursing education.

Telepremie: Our Care Delivery Experience is Changing. By Krisan Palmer

The purpose of this presentation is to describe a sustainable Telehealth solution on which to build other clinical applications.

The Panorama Program Roadmap in Nova Scotia. By Melissa Boland

Nova Scotia has successfully deployed a comprehensive electronic public health information system - Panorama. The ongoing Panorama journey seeks to attain the goal of an immunization registry of all sources accessible by all providers. The Nova Scotia Panorama Roadmap will be reviewed.

Concurrent Session 3: 1500-1600

Session 3, Room A: Patients and Families

Soutenir les proches aidants sur le Web : des interventions infirmières prometteuses (Supporting Caregivers on the Web: Promising Nursing Interventions). By Véronique Dube [French presentation]

This presentation will discuss three psychoeducational web-based interventions for caregivers supporting people with neurocognitive disorders, and supported by online coaches, in an asynchronous mode. The components of these interventions as well as the role of the nurse acting as the online coach will be considered.

Cette conférence présentera trois interventions psychoéducatives sur le Web, à l'intention de proches aidants de personnes atteintes de troubles neurocognitifs, et soutenues par des infirmières-accompagnatrices, en mode asynchrone. Les composantes de ces interventions ainsi que le rôle de l'infirmière-accompagnatrice seront exposés.

Osteogenesis Imperfecta Caregivers' Views on IT. By Aimee Castro, Khadidja Chougui, Frank Rauch, Argerie Tsimicalis

We conducted interviews with 18 caregivers of children living with brittle bone disease (Osteogenesis Imperfecta) to understand their views on using internet-based technologies, such as smartphone applications and social media, in their caregiving work. Caregivers' suggestions should inform the development of future services built to support them.

Parents' App Searching Behaviours: A Focus Group Study. By Anila Virani, Dr. Linda Duffett-Leger, Dr. Nicole Letourneau, Dr. Eleni Stroulia

A focus group study was conducted to explore Canadian parents' app searching behaviours. The data analysis described commonly used apps, gender variations in app use and factors affecting downloads and retention of apps. The data provided insight into the current app situation from parents' perspective and could be used as a guide in future parenting apps development.

Session 3, Room B: Patients and Families

Nursing is Essential for ACCESS 2022: But Are We Ready? By Tracie Risling

Canada Health Infoway has recently launched ACCESS 2022, an ambitious plan to deliver more digital health access to all Canadians. While access is an essential first step in advancing this technology, many other supports will be needed for a successful digital transformation. Nurses are uniquely positioned to facilitate this evolution, but is the discipline equipped to do this work?

Virtual Atrial Fibrillation Care: Is it Feasible? By Kathy L. Rush, Lindsay Burton, Neil Eves, Fransien van Der Merwe

Atrial fibrillation (AF) is a serious heart beat irregularity that can be hard to manage in rural communities. Providing healthcare from a distance, using telehealth, is a way to help people with AF. This study looked at whether it was an effective approach for delivering healthcare.

Interventions Web et aînés : une revue des écrits (Web-based Interventions for Seniors: A literature Review). By Audrey Lavoie and Véronique Dubé [French presentation]

En raison de leur accessibilité et de leur potentiel pour favoriser les saines habitudes de vie, les interventions Web semblent être de plus en plus préconisées auprès des aînés. Cette présentation dressera l'état des connaissances empiriques sur les interventions Web visant l'adoption de saines habitudes de vie chez les aînés. Des pistes de réflexions pour d'éventuelles études seront émises.

Because of their accessibility and their potential to promote healthy lifestyles, Web-based interventions seem to be increasingly recommended for seniors. This presentation will provide an overview of the empirical knowledge of Web interventions aimed at adopting healthy lifestyles among seniors. Avenues for reflection for possible studies will be discussed.

Session 3, Room C: Competencies

Informatics Competencies for Canadian Nurse Leaders. By Gillian Strudwick, Lynn M. Nagle, Brian Lo, Margie Kennedy, Peggy White, Leanne Currie

Despite the increasing ubiquity of health information technology in Canadian health contexts, there is currently no agreed upon set of informatics competencies for Canadian nurse leaders. This study identified informatics competencies that are of priority to nurse leaders in Canada.

Defining Informatics Practice. By Jeffrey J. Williamson

The American Medical Informatics Association (AMIA) led two initiatives to expand the understanding of the practice of informatics of informatics professionals. The Health Informatics and Clinical Informatics Subspecialty (CIS) Practice Analyses and Core Content serving as a foundation for recognition and characterize the informatics professional at different levels and areas of practice.

A Digital Health eResource. By Lynn Nagle, Glynda Rees, Richard Booth, Kristine Crosby, Cynthia Baker

The purpose of this presentation is to provide an overview of the CASN Digital Health eResource developed for use by faculty and students in Canadian schools of nursing.

Telehealth: A Mobile App for Healthcare By Krisan Palmer, Karla Sheffroth, Sarah Lavoie, Gillian Hoyt-Hallett

A mobile telehealth App was developed to provide secure capture, delivery & storage of videos taken of those pediatric patients referred to Stan Cassidy Center for Rehabilitation with significant neurological impairments. These videos, obtained by families as well as established community partners in various non-clinical settings, are critical tools through which rehab professionals can provide timely access to care.

Posters

The poster session will be during lunchtime outside room 111

- 1. Un simulateur sur écran pour s'initier à l'ICNP® Sylvie Jetté, Andréanne Tanguay, Hugo Carignan, Isabelle Reeves, Bruno Hogue**
Un simulateur sur écran permettant aux étudiantes infirmières de s'exercer à réaliser des évaluations cliniques et à documenter leur démarche de soins en utilisant l'ICNP® était proposé dans un seul cours de notre programme de formation infirmière. Afin d'élargir son utilisation dans plusieurs cours, des vignettes cliniques supplémentaires ont été développées et testées.
- 2. L'utilisation d'un outil numérique portable : la perception des infirmières en milieu communautaire par Sylvie Melanson**
Projet de recherche qui visait à connaître la perception des infirmières, œuvrant en milieu communautaire, quant à l'utilisation d'un outil numérique portable dans la pratique quotidienne des soins infirmiers et pour la prestation des soins aux patients.
- 3. Optimization of Simulated eMAR Management in Education. By Laura Brennan, Richard Booth**
This study will examine how undergraduate nursing students balance best-practice and efficiency in electronic medication administration. Several scenarios will be presented to the participants to complete using an electronic medication record. Each scenario will challenge a concept of medication administration as outlined by the College of Nurses of Ontario.
- 4. What Was it Like to Work with the New RN (Robot Nurse)? By Ryan Chan, Richard Booth**
Despite the increasing diffusion of smart robots in the healthcare settings, a sizable gap remains in research related to the dynamics between smart robots, human interaction, and the delivery of healthcare. The findings of this study will develop a greater understanding of the social processes and perceptions of human-robot relationships, and its integration within healthcare settings.
- 5. Implementing an Interprofessional eHealth Curriculum. By Leanne Currie, Victoria Wood, Abdul-Fatawu Abdulai**
We have developed a technology-enhanced game to teach informatics to 15 health practice programs at the University of British Columbia (eg: nursing, medicine, physio therapy, midwifery, pharmacy, etc). Key competencies embedded in the am include assessing patients' digital literacy, avoiding technology mediated adverse events, and understanding interoperability.
- 6. Panorama-Implementation in BC's First Nation communities. By Michelle Ham, Cecille Macalino**
Overview of Canada's first -First Nations Health Authority (FNHA) and the implementation of BC's public health repository for communicable disease management, immunizations, outbreak management and family health programs into First Nation Health Service Organizations (FNHSOs).
- 7. KnowMe: Using Technology to Know the Whole Person. By Sierra Land, Allison Bolton, Mathieu Duguay, Hailey Land, Madelyn Trudel, and Todd Hall.**
KnowMe is a patient-inclusive documentation tab that could be integrated into existing electronic documentation systems to enhance patient centered care. Health care professionals can utilize KnowMe to gain insight regarding patient preferences and needs to promote patient autonomy and increase collaborative partnerships within the interprofessional team.

8. Machine Learning and Suicide Risk Prediction: A review. By Lydia Sequeira, Gillian Strudwick, Alicia Morgan, Vincenzo Deluca, David Wiljer, John Strauss

This review sought to systematically evaluate the current state of suicide risk prediction models that have been derived from EHR data. We searched five databases using the concepts 'clinical prediction', 'Electronic Health Records' and 'suicide'. Preliminary results identified 16 articles for inclusion from four different countries.

9. Psychiatric Consumers as Partners in Health IT projects. By Gillian Strudwick, Kevin Leung, Andrew McLean, Craig Kuziemsky, Richard Booth, Sarah Collins, Elizabeth Borycki.

A study was conducted to identify how best to engage patients and their family members in the selection, adoption, use, and evaluation of health information technologies. The poster will be of relevance to those working in roles and/or settings that currently have, or are planning to implement, health information technologies.

10. Identifying Components of Meaningful Patient Portal Use. By Kevin Leung, Lydia Sequeira, Andrew McLean, John Strauss, Gillian Strudwick

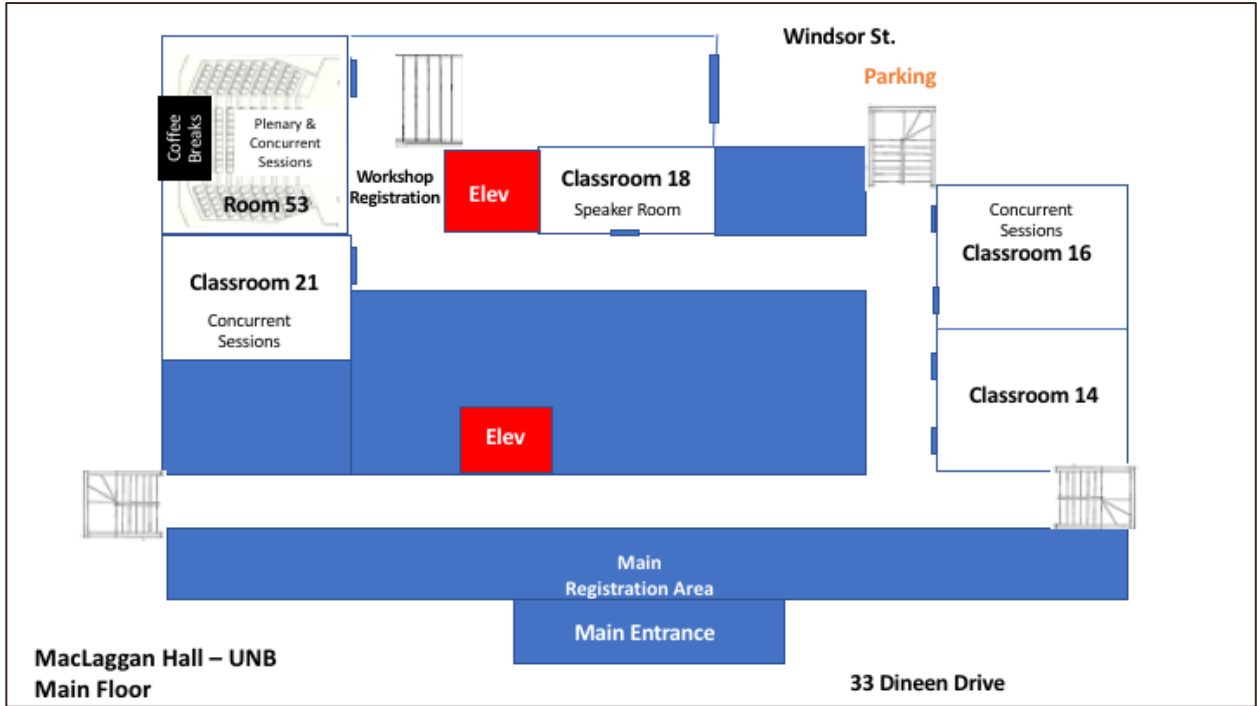
This study aims to: (1) Understand how patient portals can be effectively used by patients with mental illness to engage in their own care; (2) Identify process and outcome indicators of effective patient portal use that are meaningful to patients with mental illness.

11. Understanding the Impact of Social Media in Nursing. By Rebecca Zubkow

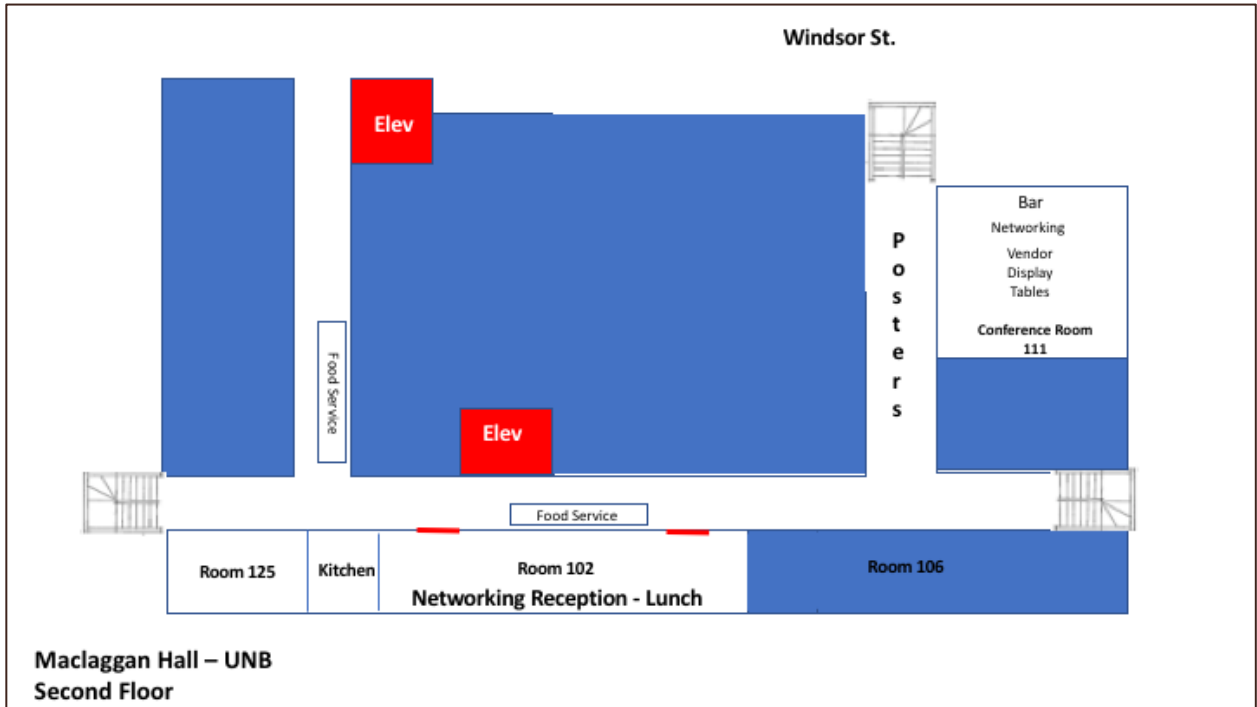
The role of nurse when it comes to SM usage is to not only understand the impact it has on their clients/communities, but the potential impact it can have on their own nursing education, clinical practice, and acceptance of particular health strategies and interventions.

Room Maps:

Main Floor



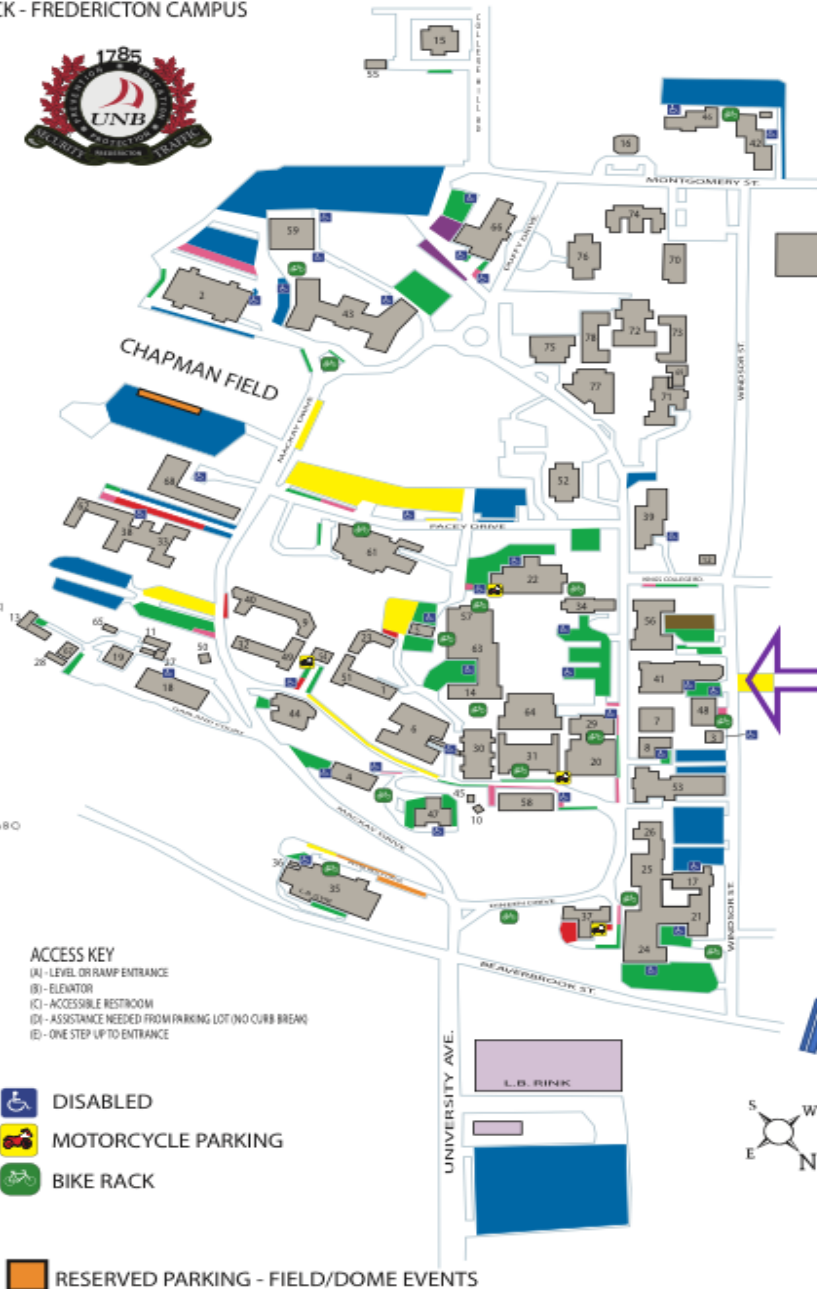
Second Floor:



UNIVERSITY OF NEW BRUNSWICK - FREDERICTON CAMPUS



1. AITKEN HOUSE - 14 BAILEY DR.
2. AITKEN UNIVERSITY CENTER - 20 MACKAY DR. (A, C)
3. ALDEN NOUNLAN HOUSE - 678 WINDSOR ST. (C)
4. ALLISON MEDICAL BUILDING - 13 BAILEY DR. (A, C)
5. ANNEX C - 13 MACCULLAY LN. (A, C)
6. BAILEY HALL - 10 BAILEY DR. (B, D)
7. BANK/BOOKSTORE - 29 DINEEN DR. (B, E)
8. BIOMEDICAL ENGINEERING - 25 DINEEN DR. (A, B, C)
9. BRIDGES HOUSE - 45 MACKAY DR. (A)
10. BRYDON JACK OBSERVATORY - 5 BAILEY DR.
11. BUILDING #7 - 6 GARLAND CT.
12. BURDEN ACADEMY - WINDSOR ST.
13. CAMPUS HOUSE - 11 GARLAND CT.
14. CARLETON HALL - 10 MACCULLAY LANE
15. CENTRAL HEATING PLANT - 850 COLLEGE HILL RD.
16. COLLEGE HILL DAYCARE - 850 MONTGOMERY ST. (A, C)
17. COMPUTER SCIENCE I.T.C. - 559 WINDSOR ST. (A, B, C)
18. ENTERPRISE UNB BUILDING #1 - 2 GARLAND CT. (A, B)
19. ENTERPRISE UNB BUILDING #2 - 8 GARLAND CT.
20. FORESTRY & GEOLOGY BUILDING - 2 BAILEY DR.
21. GILPIN HALL - 548 WINDSOR ST. (A, B, C)
22. HARRIET IRVING LIBRARY - 5 MACCULLAY LN. (A, B, C)
23. HARRISON HOUSE - 12 MACCULLAY LN. (A)
24. HEAD HALL - 10 DINEEN DR. (A, B)
25. HEAD HALL/OLD CIVIL ENGINEERING - 17 DINEEN
26. HEAD HALL/ELECTRICAL ENGINEERING - 19 DINEEN DR.
27. HEADER HOUSE - 4 GARLAND CT.
28. HUT #5 - 5 GARLAND CT.
29. I.L.I.C. FORESTRY - 25 DINEEN DR. (B)
30. I.L.I.C. PHYSICS & ADMINV. - 8 BAILEY DR. (A, B, D)
31. I.L.I.C. SCIENCE LIBRARY - 4 BAILEY DR. (A, C)
32. JONES HOUSE - 26 BAILEY DR.
33. JOY W. REED HOUSE - 42 MACKAY DR. (A, B, C)
34. KIERSTEAD HALL - 38 DINEEN DR. (A, B, C)
35. LADY BEAVERBROOK GYM - 2 PETER KELLY DR. (A)
36. LADY BEAVERBROOK GYM MOBILE - 4 PETER KELLY DR. (A)
37. LADY BEAVERBROOK RESIDENCE - 9 DINEEN DR. (A)
38. LADY DUNN HALL - 40 MACKAY DR. (A, B, C)
39. LUDLOW HALL - 41 DINEEN DR. (A, B, C)
40. MACKENZIE HOUSE - 43 MACKAY DR. (A, D)
41. MACLAGGAN HALL - 33 DINEEN DR. (A, B, C, D)
42. MAGEE HOUSE - 780 MONTGOMERY ST. (A, B, C)
43. MARSHALL D'ARVAY HALL - 10 MACKAY DR. (A, B, C)
44. MCCORMELL HALL - 19 BAILEY DR. (A)
45. MCCORD HALL - 7 BAILEY DR.
46. MCLEOD HOUSE - 818 MONTGOMERY ST. (A, B)
47. MIDORIAL HALL - 9 BAILEY DR. (A, C)
48. MURIEL MCQUEEN FERGUSON CENTER - 678 WINDSOR ST. (A, B, C)
49. NEILL HOUSE - 22 BAILEY DR. (A, C)
50. NEVILLE HOMESTEAD - 56 MACKAY DR.
51. NEVILLE HOUSE 16 BAILEY DR. (A, C)
52. NRC - 40 DINEEN DR. (A, B, C)
53. PROVINCIAL ARCHIVES - 23 DINEEN DR. (A, B, C)
54. RESIDENCE ADMINISTRATION BUILDING - 20 BAILEY DR. (B, D)
55. SALT STORAGE BUILDING - 767 KINGS COLLEGE RD. (E)
56. SERVICES BUILDING - 767 KINGS COLLEGE RD. (E)
57. SINGER HALL - 7 MACCULLAY LANE (A, C)
58. SIR HONORIO DOUGLAS HALL - 3 BAILEY DR.
59. SOUTH GYM - 16 MACKAY DR. (A)
60. STORAGE SHED 3 GARLAND CT.
61. STUDENT UNION BUILDING - 21 PACEY DR. (A, B, C)
62. THBRTS HALL - 40 MACKAY DR. (A, C)
63. TILLEY HALL - 9 MACCULLAY LANE (A, B, C)
64. TOOLE HALL - 30 DINEEN DR. (A, B, C)
65. UNDER BUILDING - 10 GARLAND CT.
66. WU CENTER/ COLLEGE OF EXTENDED LEARNING - 6 DUFRÉ DR. (A, B, C)
67. YELLOW BUILDING - 7 GARLAND CT.
68. NEW RESIDENCE - 34 MACKAY DR. (A, B, C)



#41: McClaggan Hall Parking will be available in the Staff areas (GREEN). Please contact us for a parking pass.



ST. THOMAS UNIVERSITY

69. ADAMSONS & RECEIPTION CENTRE - 53 DINEEN DR. (A, B, C)
70. BROWN WILSON HALL - 825 MONTGOMERY ST. (A, B, C)
71. EDMUND CASEY HALL - 51 DINEEN DR. (A, B)
72. GEORGE MARTIN HALL - 50 DINEEN DR. (A, B, C)
73. HARRINGTON HALL - 53 DINEEN DR. (A, B, C)
74. HEEF CROSS HOUSE - 88 HIGHTSHAM ST. (A, B, C)
75. J.B. O'NEILL FITNESS CENTER - 45 DINEEN DR. (A, C)
76. MARGARET MORRIS MCCANN HALL - 9 DUFRÉ DR.
77. ST. JAMES DUNN HALL - 67 DINEEN DR. (A, B, C)
78. WINTER HALL - 41 DINEEN DR. (A, B, C)

- ACCESS KEY**
- (A) - LEVEL OR RAMP ENTRANCE
 - (B) - ELEVATOR
 - (C) - ACCESSIBLE RESTROOM
 - (D) - ASSISTANCE NEEDED FROM PARKING LOT (NO CURB BREAK)
 - (E) - ONE STEP UP TO ENTRANCE

- | | |
|---|--|
| RESIDENT STUDENT | DISABLED |
| GENERAL | MOTORCYCLE PARKING |
| STUDENT | BIKE RACK |
| STAFF/ FACULTY | |
| VISITOR | |
| CAMPUS REC | RESERVED PARKING - FIELD/DOME EVENTS |
| WU CENTER CLIENT | SERVICE PARKING |