

Centre des sciences de la santé de Kingston

2024 **Professional Practice Report**

Chronicling a year of growth, innovation and knowledge on our nursing and allied health teams.



This is the balance

where skilled teams provide compassionate care.

A message from our leaders

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allied health

professionals

nurses

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A message from our leaders

As we reflect on the past year, we are proud of the contributions and achievements of our nursing and allied health teams at Kingston Health Sciences Centre (KHSC). This report highlights the progress and impact of our professional practice initiatives, showcasing the dedication and expertise of our teams.

In 2024, we adopted new approaches to address the challenges facing healthcare. From onboarding pathways for internationally educated nurses to advanced simulation training programs, these initiatives have enhanced our workforce, improved patient outcomes, and elevated the quality of care. The introduction of innovative care models, such as the social work dyad, and targeted clinical interventions have had a significant impact on how we deliver care to patients and families.

Nursing and allied health professionals have played an integral role in shaping care this past year. Their ability to adapt to the evolving challenges of healthcare while continuing to advance evidence-informed practices highlights their commitment to excellence. This dedication to ongoing professional development and collaboration enhances the quality of care we provide and contributes to making KHSC a great place to work and practice.

Looking ahead, we remain committed to supporting continued professional development, fostering innovation, and advancing excellence in practice. The achievements outlined in this report reflect the collaboration, expertise, and dedication of our teams.

Thank you for living our values and for continuing to make KHSC a place of learning, collaboration, and excellence.

Thank you to our Professional Practice Leaders for their role in bringing many of these initiatives to life: Rachel Ashby, Sonya Bianchet, Justin Coughlin, Angela Hollett, Heather Mackulin, Kim Smith & Laura Stephens.



Setting internationally educated nurses up for success

Like many hospitals across the nation, KHSC faced the challenges of health human resource shortages. Recognizing internationally educated nurses (IENs) as a valuable and underutilized nursing resource, our teams implemented a number of support systems to facilitate IENs successfully integration into practice.

To strengthen the recruitment and retention of IENs, the IEN Working Group advocated for enhanced infrastructure, including a comprehensive onboarding pathway and the introduction of a dedicated Clinical Learning Specialist (CLS) to address their unique needs.

In the summer 2024, we launched an additional four-day orientation program specifically for IENs informed by literature, the lived experiences of IENs, and learnings from other health care organizations across the country. This orientation focuses on hands-on practice and simulation activities related to systems assessments, medication preparation & administration, medical/surgical skills, and communication with members of the interprofessional team. IENs joining KHSC all report to a single manager to ensure continuity in their experience and foster a sense of community for these individuals.

Early data shows a 38% increase in retention and a 35% reduction in learning plans, and most notably a 0% rate of terminations or resignations from the IEN population. The next evolution of this program involves launching a preceptor-specific workshop in winter 2025 to support experienced nurses in successfully mentoring IENs.

Advancing our knowledge with Clinical Nurse Scholars

With support from the Ministry of Health (MOH), KHSC has implemented four Clinical Nurse Scholars (CS) to provide teaching support to staff, enhance transitions from new hire to expert nurse, and increase staff retention across inpatient units at KHSC.

This role provides support to nursing across the organization including new graduate nurses, internationally educated nurses, and any nurse requiring in-the-moment support. This is a supernumerary role with a focus on providing skill development and hands-on education to KHSC nurses. Our CS team has a wealth of collective clinical experience to draw from and share a passion for educating and developing skills in others. They engage nurses via regular rounding at the unit level, while also accepting direct requests for assistance. Based on the analysis of KHSC reporting data, inpatient medicine nurses are among the highest users of this corporate resource.

The shared capacity of KHSC nurses continues to expand with each CS encounter. Their ability to provide focused just-in-time education based on best practice broadens knowledge for novice nurses in providing high-quality care.

Every single one of these experienced nurses selflessly shares their wealth of knowledge and experience with no sense of superiority. These nursing heroes help make KHSC a safe place to grow & develop as a young nurse.



Forging a better path for Advanced Practice Nursing

Despite the demonstrable impact that Advanced Practice Nurses (APNs) bring to patient outcomes at KHSC, historically there has never been a formal onboarding process to support this invaluable role.

APNs working across the organization are leading the development of a corporate APN onboarding pathway to support orientees in meeting with interprofessional teams, receiving mentorship from pharmacy colleagues, and completing a skills evaluation. The pathway was evaluated by a master's student through pre & post onboarding surveys, one-on-one interviews and focus groups. The results confirmed that the pathway has enhanced the on-boarding experience of APNs joining KHSC. As we look to the future of this pathway, our teams will be exploring the development program-specific onboarding content.

Expanding opportunities for simulation-based education

Whether they are fresh on the job, or more than 30 years into their career: healthcare workers are always seeking to learn and build on their skillset. Engagement sessions with staff at KHSC revealed that the critical care team was eager to access more professional development, continuous education, and clinical simulations.

Using funding from Critical Care Services Ontario (CCSO), we launched a simulation program lead by two simulation specialists, an educationalist from Queen's University School of Nursing and a Professional Practice Leader - Nursing.

Together, this team has provided simulation training to more than 400 staff, and have grown the program from our adult and pediatric critical care units to the post-anesthesia care unit, emergency medicine and inpatient pediatrics. The team has also bolstered our in-house development opportunities by developing an Advance Cardiac Life Support (ACLS) and Basic Life Support (BLS) program, upskilling nearly 100 staff members in just a few short months.



"No pressure, well taught, and applicable to my practice."

"It made me more confident and less confused about LUCAS and how to put it on." "I enjoyed being able to gain hands on experience on emergency skills we don't use often in a judgementfree environment."



Enhancing clinical education for allied health teams

The Clinical Educator plays a crucial role in advancing patient care by fostering continuous learning, professional development, and adherence to evidence-based practices. To support recruitment, retention, and to promote competency development of staff and students, the Clinical Educator role has been implemented across multiple allied health departments including Respiratory Therapy, Physiotherapy and Clinical Nutrition.

Just like the Clinical Learning Specialist role has been instrumental in supporting the knowledge, skills and abilities in nursing staff, allied health leaders knew a similar resource for their professional groups would address many practice and education gaps for their teams.



Clinical Educators are also critical for attracting and retaining allied health professionals. This is because the role supports staff and student growth through mentorship, orientation, and ongoing education, while also enhancing clinical practice by implementing researchdriven policies and procedures.

Success of the role will be measured by the number of staff recruited and retained within the professional groups, reduction in staff learning plans, successful completion of the orientation and on-boarding process, and partnerships with academic institutions resulting in generation of academic initiatives.

For the professional groups that have already implemented the role, an early success has been their invaluable role in educating staff and supporting change management as we transition to the Lumeo system.

Better, together: a new model of care for social work

Within the psychosocial oncology program, we identified an opportunity to explore a stepped model of care for social work through the introduction of a social service worker (SSW) role to partner with the Masters-prepared social worker (MSW)

A stepped model of care is considered best practice for providing supportive care services by ensuring the most effective, yet least resource-intensive services are delivered to support patient needs. In the MSW-SSW dyad, this means the SSW provides practical and resource-related interventions while the MSW provides complex psychosocial interventions. By responding to practical needs first, patients are better positioned to cope with the impact of their cancer treatment, and better able to engage in psychosocial interventions if needed.

The dyad model allows the MSWs to focus their time on the complex psychosocial situations that utilize their full scope of practice. Consults are bidirectional, ensuring the MSW can engage the SSW for practical needs and the SSW can engage the MSW if complex needs are identified. This supports both roles to work within their scope of practice while helping maximize patient access to care within the available resources.



Early success: **15.7 to 24.6%**

new consults seen in <2 weeks

Since adding the SSW role in psychosocial oncology, we have seen an increase in consults and a decrease in wait times.



Raising the bar **combat malnourishment**

Malnourished patients often experience longer hospital stays and are twice as likely to be readmitted in the future. In 2024, the clinical nutrition team at KHSC implemented a number of interventions according to the Integrated Nutrition Pathway for Acute Care (INPAC). Now, our teams can better identify and care for patients who are at risk of malnourishment.

What does INPAC look like at KHSC?



Optimized nutrition screening tools built directly into many admission forms, with at-risk patients being seen by the clinical nutrition team within 72 hours.



Improved standard nutrition care through the reintroduction of the Hospital Elder Life Program (HELP), NPO/Clear Fluid diet monitoring, and advocacy for higher protein or higher energy meals on key units.



Launch of MedPass, a program which provides a small, nutritionally dense supplement to patients with advanced nutrition needs, boosting their nutrients at regular times during the day.



A winning approach to mobility

It is well known that early mobilization is a very important factor to one's well-being, healing, and can even contribute to shorter hospital stays. However, due to various challenges across units, mobilizing patients often became difficult – until an innovative team saw a way to make it happen.

The Clinical Extern and Mobility teams were established to address this gap. These teams consist of healthcare students enrolled in nursing, physical therapy, occupational therapy, or paramedic programs. With guidance of clinical externs, these students are assigned to units throughout KHSC, where they apply skills aligned with their educational backgrounds, focusing specifically on mobilizing patients. Since spring of 2024, 34 individuals have already been trained and oriented at in-person learning sessions led by a team of physiotherapists, occupational therapists, the ergonomist and interprofessional learning specialists.

"Feedback from frontline staff, post-secondary institutions, and mobility team members highlights that the program has significantly enhanced their ability to deliver care" says Heather Mackulin, Professional Practice Leader in nursing. "The handson experience gained through patient interaction in the role directly contributes to a deeper understanding and application of knowledge in their academic studies."

The development and success of these teams earned a coveted KHSC Team Award in the Knowledge category.





Nursing & Allied Health Awards of Excellence

This year we launched two Awards of Excellence programs to recognize the nurses and allied health professionals who consistently demonstrate dedication, distinction, and commitment to their profession, our patients and families, and the broader community.

"Creating this awards program is our way of recognizing and honoring the outstanding impact and contributions of these staff," says Jason Hann, Chief Nursing Executive at KHSC. "It's an opportunity for us to shine a spotlight on those among us who embody the very best of the profession."

2024 Awards of Excellence Winners



Nursing Practice: Samantha Birchall, Emily Murphy, Charleigh McFarlane, Buffy Emmons, Marla Turner, Kaitlin Cormier, Natalie Witton, Aiden Castillo, Alanna Brewer New Graduate Nurse: Obianuju Odunze Ifeagwu Nursing Mentorship: Mark McRoberts Nursing Education: Rebecca Gill Advanced Practice Nursing: Janet Obre Nursing Leadership: Tammy Darton Nursing Research & Evaluation: Kelly McNabb Allied Health Practice: Alan MacVicar, Physiotherapy Allied Health Education & Mentorship: Sandy Fodey, Respiratory Therapy Allied Health Research & Evaluation: Paola Hunter, Registered Dietitian

Academic publications

Nursing

Clark, J., Conway, D., DaCosta, S., Durafourt, B., Hall, C., Gill, R., & Oskrdal, J. (2024, October 30). Pilot project: Nurse-led insertion of feeding tubes with a guidewire. QI Showcase, Kingston Health Sciences Centre.

Hann, J., Mitchell, L., & Proulx, T. (2024, October 30). Analysis and recommendations from the Clinical Nurse Scholars' data at KHSC. QI Showcase, Kingston Health Sciences Centre.

MacKinnon, A., Brosso, M., Mitchell, L., Huddle, T., Hagerman, J., Colbourne, M. (2024, October 30) Enhancing IEN Onboarding Through Tailored Orientation and NGGI. QI Showcase, Kingston Health Sciences Centre.

Mackulin, H., Brown, C., Dar, Y., Nursing Practice Council, & Mitchell, L. (2024, October 30). Implementation of the MORSE falls scale. QI Showcase, Kingston Health Sciences Centre.

Mackulin, H., Foster, N., Kaye, L., Kennedy, K., Burns, L., Bomba, J., & Braund, H. (2024). Evaluating a critical care simulation program. International Meeting on Simulation in Healthcare (IMSH), 2025, Orlando, FL.

Mackulin, H., Foster, N., Kaye, L., Kennedy, K., Burns, L., Bomba, J., & Braund, H. (2024, October 30). Implementation of a simulation program at Kingston Health Sciences Centre. QI Showcase, Kingston Health Sciences Centre.

Mitchell, L., Hann, J., Madaan, A., Albrough, R., Keller, A., & Hart, T. (2024, October 30). Operationalizing the Safer Nursing Care Tool (SNCT)@KHSC. QI Showcase, Kingston Health Sciences Centre.

Weekes, K., Roland, R., & Brosso, M. (2024, October 30). Enhancing peripheral IV access with ultrasound-guided training in D4ICU. QI Showcase, Kingston Health Sciences Centre.

Wilkinson, A., Mitchell, L., & Hann, J. (2024, October 30). Evaluation plan for onboarding process of advanced practice nurses at Kingston Health Sciences Centre. QI Showcase, Kingston Health Sciences Centre.

Awards & Designations

KHSC Team Award for Knowledge - Clinical Extern and Mobility Team (2024, February 26)

RNAO: Best Practice Spotlight Organization Designation (June 2023, up for renewal March 2025)

Allied Health

Ashby, R., Bonney, J., Graham-Gallant, M., Mitchell, L., & PSO Social Work Team. (2024, October 30). Social work dyad model of care delivery. QI Showcase, Kingston Health Sciences Centre.

Ghimire, S., Petrovic, A., & Kellowan, R. (2024, May 3). Canadian stroke best practices: Are we meeting the mark? Canadian Association of Occupational Therapists Conference, Halifax, NS, CAN. Poster presentation.

Kellowan, R, Casavant, A., Chasse, S., Rubinstein, M., & Wenner, E. (2025, May 7-9). Designing an mCIMT kit for acute stroke patients. Canadian Association of Occupational Therapists Conference, Edmonton, AB, CAN.

Kellowan, R, Fabbro, S., Leger, S., Smith, K., & Keller, A. (2025, May 7-9). The missing link: Occupational therapists on wound prevalence survey teams. Canadian Association of Occupational Therapists Conference, Edmonton, AB, CAN.

Kellowan, R, Reeves, J. (2024). An opinion piece on recruitment and retention by occupational therapists. (2025, May 7-9) Canadian Association of Occupational Therapists Conference, Edmonton, AB, CAN.

Kellowan, R, Wee, C., & Dyck, A. (2025, May 7-9). Stakeholder perspectives on clinical utility of heel offloading devices. Canadian Association of Occupational Therapists Conference, Edmonton, AB, CAN.

McDougall, E., Toth, L., & Kellowan, R. (2024, May 3). Northern reflections: Recruitment and retention advice for student occupational therapists. Canadian Association of Occupational Therapists Conference, Halifax, NS, CAN. Poster presentation.

Osei, M., & Kellowan, R. (2024, May 3). Modified constraint-induced movement therapy for acute stroke patients. Canadian Association of Occupational Therapists Conference, Halifax, NS, CAN. Poster presentation.

Schmid, C., Kellowan, R., & van der Wal, T. (2024, October 30). Interdisciplinary collaboration to promote novel high-tech AAC system for critical care patients at KHSC: A case study. QI Showcase, Kingston Health Sciences Centre.

Stanley, S., Valleau, V., Al Ammary, D., & Khurshid, F. (2025). Advancing neonatal care: Practice changes in respiratory support at KHSC. Evidence-based Practice for Improving Quality (EPIC), Montreal, QC.

Stanley, S., Valleau, V., Al Ammary, D., & Khurshid, F. (2025). The implementation of practice change introducing MIST in the NICU. Evidence-based Practice for Improving Quality (EPIC), Montreal, QC.