Preparations are well underway for the CTL Sixth Annual Symposium on Teaching and Learning. We are looking forward to stimulating discussions on engaging students in the classroom and clinical settings through experiential learning.

To hold at Rotana Hotel, the day would feature 3 pre-symposium workshop sessions, 15 interactive presentation sessions, and 3 conversation cafés with presenters from various educational institutions within and outside Qatar.

Presenters will share ideas on team-based learning, learning spaces, simulation, multi-media, BPSO, students as partners, educational technology amongst others. Dr. Jessie Johnson has also organized an incredible plenary session featuring a panel of undergraduate students from different institutions in Qatar.

Registration for the symposium will open by the first week of June and we look forward to seeing you at Rotana Hotel.
The complexity of the healthcare environment requires that healthcare professionals have the ability to think critically and intervene appropriately in patient care situation to improve patient outcomes. A critical thinking approach to clinical practice enables practitioners to independently come to judgements about best practice and consequently to provide safe, appropriate, and relevant care to patients (Price, 2015).

What is Critical Thinking?

The concept of critical thinking is a common theme in the healthcare professional practice. Panettieri (2015) defines critical thinking as a process of mind that includes cognitive and affective domains of reasoning. Price (2015) suggests that critical thinking is a means of considering possibilities by examining alternative arguments in order to arrive at logical, coherent, and clearly articulated conclusions. Last but not least, Robert and Petersen (2013) consider critical thinking to be a cognitive process of reasoned opinion that focuses equally on the process itself and the outcome.

Characteristics of Individuals

An individual who thinks critically asks questions, is able to gather relevant information about a situation, analyzes and interprets the information, accepts alternatives, and communicates findings effectively (Panettieri, 2015). Critical thinkers are characterized by flexibility, adaptability, persistence, willingness to innovate, consensus seekers, and open mindedness (Maudsley & Strivens, 2000). Through critical thinking the learner looks at previous knowledge and experiences as resources for alternatives to a present situation. In nursing practice, a critical thinker is considered an individual who is able to and has the courage to question credible but potentially misleading information related to patient care (Gupta & Upshur, 2012). All these various attributes allow individuals who possess critical thinking to synthesize and evaluate concepts in order to reach accurate conclusions.

Barriers and Facilitators

Critical thinking has many aspects that make it difficult to acquire and apply in the healthcare practice. Personal obstacles such as egocentric and sociocentric ways of thinking may inhibit one’s ability to think critically. Individuals who are egocentric would not accept other opinions but their own, while the sociocentric thoughts focus only on one’s own social group (Panettieri, 2015). By refusing alternatives, relevant evidence may be disregarded with a biased effect on the decision making process.

An unfriendly educational and clinical practice environment is another barrier to critical thinking. Dysfunctional group dynamic, stereotyping, and
power and control issues inhibit an individual’s ability to critically think (Gupta & Upshur, 2012; Robert & Petersen, 2013). In such an environment students and healthcare professionals would not feel comfortable with questioning their own decisions and the decisions of those around them.

In healthcare education, traditional teaching methods that encourage memorization rather than understanding of concepts potentially inhibit the development of critical thinking skills (Gaberson, Oermann, & Schellenbarger, 2015). Also, an educational approach based on excessive demands on students who are provided with a lot of theoretical information but less practice opportunities may also constitute a barrier to critical thinking (Spencer, 2008). Critical thinking cannot be taught once and then students be expected to display it in every situation. Students need time to develop critical thinking skills as well as good background knowledge. Furthermore, students who possess adequate theoretical knowledge need to be given the opportunity to experience and practice that knowledge in different clinical situations in order to develop critical thinking skills (Panettieri, 2015).

Despite the barriers, there are various individual and organizational factors that contribute to and facilitate the development of critical thinking. At the individual level: open mindedness, a rational thought, and the ability and the courage to challenge one’s own thinking, are desirable attributes that facilitate critical thinking. At the organizational level, an environment characterized by open dialogue and communication, and valued participation in the decision making process encourages and supports critical thinking (Chan, 2013).

Teaching Methods or How to Enhance Critical Thinking

As discussed above, critical thinking is not directly associated with the amount of theoretical information provided. Instead, nursing students need practice and guidance on how to use the available information and resources to make sound clinical judgements. Therefore, curricula that allow direct participation and exposure to real life situations as well as student expression of ideas would support and sustain the development of critical thinking (Spencer, 2008). However, one single exposure to practice that encourages critical thinking skills is not be sufficient. In order to enhance students’ critical thinking skills, there has to be a “cumulative set of mutually reinforcing experiences” over a longer period of time (Pascarella & Terenzini 1991, as cited in Drennan, 2010, p. 428).

To increase the effectiveness of pedagogical approaches in enhancing students’ critical thinking, a variety of activities need to be included. Activities such as: case-studies, concept mapping, journaling, debates, and group presentations have the potential to help nursing students develop critical thinking that is necessary in the clinical practice (Gaberson et al., 2015). Another activity that encourages direct participation in the decision making process and the use of critical thinking skills is simulation. Simulation experiences mimic the reality of clinical setting; therefore it gives students the opportunity to get involved in and learn from a clinical situation in a nonthreatening environment. Debriefing sessions at the end of the simulation and clinical practice are opportunities for educators to guide students in reflecting on their practice and in making meaning of their experiences. Reflection on previous experiences might trigger critical thinking when students look at those experiences as an alternative to a present situation (Spencer, 2008). When these activities are implemented, the cognitive and affective domains of learning are developed.

Educators have an essential role in increasing the effectiveness of the teaching methods. A constructivist approach that incorporates a student-centered perspective could be used by healthcare educators to assist students to develop critical
thinking skills. In a constructivist learning environment learners’ thinking is challenged. Teaching does not mean a simple transition of knowledge to learners; rather, by using higher order questioning educators could help learners build new knowledge by creating mental representations of events and experiences (Melrose, Park, & Perry, 2014).

To be able to properly guide students in critical thinking it is important that educators state clear expectations, be approachable, encourage independence and expressiveness, and provide feedback and constructive criticism (Drennan, 2010). Furthermore, healthcare educators need to assess students’ knowledge, attitudes, and skills in order to have an understanding of students’ values in regards to patient care as well as their previous experiences with the healthcare system (Gaberson et al., 2015). These strategies would allow educators to support students in identifying personal learning needs and to create an environment that fosters the development of critical thinking skills.

**Conclusion**

The paper demonstrates that critical thinking is considered an essential component of professional and quality patient care, and an important outcome of healthcare education. A combination of attitudes and knowledge, critical thinking occurs within and across the cognitive and affective domains of learning and it requires an open mind, flexibility, and willingness to innovate as well as a clinical environment that supports and encourages the participation in the decision making process. Nursing students need time, a variety of activities, and appropriate guidance to develop critical thinking skills. Therefore, a pedagogical approach that values students as knowledgeable individuals and that invites inquiry and provides students with practice opportunities constitutes the appropriate setting in which critical thinking skills can be developed.

If you would like to know more or discuss this or related topics with us? Come on over to CTL for a chat or contact us for a meeting (Dr. Frances Kalu, fukalu@ucalgary.edu.qa; Alina Botis, valeriaalina.botis@ucalgary.edu.qa).

**A Question of Philosophy**

Lois Thornton, RN, MN - Nursing Instructor

Are our teaching practices based on what we value and believe to be true about teaching and learning? Does our teaching reflect what we say we value? How well do our values and beliefs align with the values espoused by our nursing program? These questions were considered in a recent session of the Teaching and Learning in Nursing Education Book Club Series. This semester, book club participants are reading and
discussing Clinical Teaching Strategies in Nursing (Oermann, et al, eds., 2018) which begins with a deliberation of curriculum philosophy and the philosophical context for clinical teaching.

Oermann, et al (2018) argue that a carefully constructed curriculum philosophy makes clear a shared system of beliefs and values, and acts as a guide for examining issues and determining priorities (p.4). However, they point out that philosophy statements have no value if they are forgotten, misunderstood, or inconsistently used (p. 5), or if they remain as just words on the page (forever lost in SharePoint!) and are never examined in relationship to what is practiced. If this happens, the door is opened for multiple personal philosophies to be applied, and an inconsistency of approach from course to course.

Whether we realize it or not, we all have a philosophical approach to our teaching, both clinical and classroom, and it affects how we see ourselves as teachers, how we view our students, and how we go about our teaching (p. 5). For the good of our learners, perhaps it is time that we had a good hard think about what it is we believe and value about teaching, evaluate whether our actions are congruent with what we say we believe, and appraise how well our personal philosophies fit with the philosophy of University of Calgary in Qatar.

UCQ’s philosophy statement, adopted from the Faculty of Nursing, University of Calgary, describes learning as continuous, creative, purposeful, transformative, and taking “place in relationships that are reciprocal, respectful and collaborative, emphasizing integrity and accountability.” A spirit of inquiry and self-direction are held as essential qualities of learning at UCQ, where “knowledge and expertise are freely shared with mutual respect and integrity.” These are lofty ideas, indeed, and deserve to be regularly pondered and discussed by a faculty striving for excellence in the education of professional nurses for the health care system in Qatar.

Check it out!
You can find the complete philosophical statement on SharePoint at https://intranet.ucalgary.edu.qa/sites/ucq/academic/nursing/acc/Shared%20Documents/FINAL%20Appendices/O.%20Bachelor%20of%20Nursing%20Regular%20Track%20(BNRT)%20Curriculum/O.1%20Philosophy/a.%20Philosophy%20Statement.pdf

In class participation: To grade or not to grade?

Nicole Boulais McBain, RN, MN - Nursing Instructor

It is not unusual to see instructors grading their students for participating in class but do we stop to wonder about the benefits and challenges associated with this practice? Although participation is an important component of the student’s learning process, instructors frequently face serious challenges when attempting to assess or grade their student’s participation (Czekanski & Wolf, 2013; Gainor & Precourt, 2017; Gillis, 2019; Mello, 2010; Paff, 2015; Rogers, 2013). Various research studies propose similar strategies on the topic of facilitating participation in class but appear to have conflicting results when it comes to grading student’s participation (Paff, 2015). There seems to be two distinct “camps” where some
instructors think it is essential to assign participation marks in order to promote and obtain student’s participation, while others believe it should never be graded (Mello, 2010; Paff, 2015; Rogers, 2013).

**Pros and Cons of Grading in Class Participation**

According to Mello (2010), the benefits of grading participation are: improving students class preparation; facilitating real-world learning and application of knowledge; improving job preparation; improving the development of critical thinking skills, acquisition of active learning and listening skills; facilitating critical communication skills; reinforcing behavioural outcomes; and encouraging the participation of different students. On the opposite side of the spectrum, the criticisms associated with grading participation include: highly subjective process; difficulty in interpreting student’s behaviour; requiring a diligent systematic tracking and recording system; lack of consideration for student’s personality; lack of consideration for cultural perspective; students focus on quantity rather than quality of intervention; and small number of students account for 50% of interaction.

A consensus that exists between both “camps” is on the subjectivity of grading participation (Gainor & Precourt, 2017). This subjectivity is fuelled by different elements associated with the grading process, one of them being the fairness of the instructor and the method they use. In fact, most instructors rely on memory or through counting the number of times each students speak in the class as their main methods for grading participation (Gillis, 2019). This method can produce strong inequality especially in large group and promotes the importance of quantity of interventions over quality in class discussions (Czekanski & Wolf, 2013).

Another problem lies with the definition of participation since there is a lack of clarity, a lack of consensus and a lack of awareness as the definition differs greatly between students and instructors (Gainor & Precourt, 2017). According to Fritschner (2000), the faculty define and view participation through different levels from: breathing and staying awake; coming to class, taking note, completing assignment; writing reflective and thoughtful papers; asking questions in class, making comments and input in discussion; doing additional kinds of research or preparing additional questions; to making oral presentation where students become teachers. For the students, their definition of participation varies considerably according to their personalities, attitudes, and backgrounds; if they are comfortable in class, they will define it as voluntary speaking out in class and group activities but if they are more reserved, they will define it as active listening, being prepared, and doing assignments. Trying to bridge this gap, Paff (2015) suggests a broader definition of student’s participation including nonverbal engagement behaviours like note-taking activities, active listening tasks and homework preparation in order to be respectful and inclusive of student’s culture and personality.

Many instructors rely on a specific rubric in order to clarify their definition and ensure that all students understand the requirements associated with the participation grade. Supplying a detailed grading rubric may help in providing a similar definition but according to Meyer et al. (2018), even a detailed rubric is associated with moderate congruence between students and professors perception of participation. In an attempt of fairness and as a learning activity, a self-evaluation could also be used for grading participation, but instructors should keep in mind the possibility for students to over grade their participation. Studies showed that students grade themselves higher than faculty when they complete their self-evaluation on participation (Czekanski & Wolf, 2013; Meyer et al. 2018).

There is limited research documenting elements and direct effectiveness of grading student participation. Research shows that student participation does not increase or decrease regardless of the weighting of the participation marks assigned (Gainor & Precourt, 2017). This view is supported by the results of direct study by Paff (2015) who concluded that grading participation affected only 30% of the surveyed students even with clear participation expectations, student’s self-assessment, fairness of the process, and student’s agreement on the weight of the participation grade.

In order to tackle those issues, Gillis (2019) proposes using student’s participation as a skill building exercise instead of purely for assessment purposes or grading. This approach involves a pre self-evaluation of class participation by the student, the establishment of
specific goals to improve, frequent follow up of these goals between the student and the instructor, and a grade result based on improvement. This way, the collaboration between students and faculty toward reaching these goals will equip the students with active participation skills they would be able to apply to other courses.

Strategies for Grading in Class Participation

In an attempt to facilitate the process and to tackle the perceived unfairness of grading student’s participation, the following strategies have been proposed in this review: Use a low weight grade like 5 or 10 percent of total course grade since there is no perceived benefit if it is higher; Providing a clear definition of participation and having the students agreeing on it; Providing a clear and specific rubric based on a minimum of 3 different criteria in an attempt to capture different student’s personality and style; Creating a classroom environment where students have the opportunity to participate and earn the grade; Including a student self-assessment in the process; and reporting student’s participation grade minimally twice during the course term to provide feedback and opportunity for improvement.

Conclusion

Based on this review, there is no doubt that participation should be facilitated but grading student participation is a difficult practice to support in view of the perceived unfairness of the process and the lack of evidence supporting its effectiveness. Although teaching and grading strategies need to be adapted to the context and the population it serves, instructors deciding to grade participation should genuinely questioning their motives before electing to use it. Having done so, choosing a skill building exercise for grading as proposed by Gillis (2019) may provide some fairness in the process since the grade is based on the students achieving the goals they have themselves identified to improve their participation in class. Regardless of the method chosen, instructors who intend to grade their students in class participation need to take additional precaution to minimize the perceived unfairness of this grading practice.

Using Personal Videos to Enhance Self-awareness through Reflection

Dilshad Pirani, RN, RM, MN, MBA - Nursing Instructor

When I took the lead for the course Leadership and Management (NURS537) for winter 2019, I started to think about different strategies that can facilitate the achievement of the course learning outcomes. Based on my leadership experience over the years, I believe that self-awareness plays an important role in every aspect of our life because it influences our judgments and our decision-making practices. Within nursing leadership, most of the time we interact with the people we serve. These include our supervisors, internal customers (direct reports, staff, colleagues, etc.) and external customers (patients, families, vendors, etc.). One of the success factors for nursing leaders is how they communicate verbally and non-verbally in situations they encounter, which makes it important for nursing leaders to be aware of their personal strengths, leadership style, and how they present themselves in front of the others. Therefore I consider self-awareness as being the foundational stone of the leadership development journey.

When it comes to enhancing self-awareness, watching oneself in action, provides the opportunity for self-reflection which leads to enhanced self-awareness. Videos are an excellent way of providing feedback as we see ourselves in action. Clark (2012) supports this
view by explaining that videos of leaders in practice have recently become a key component of leadership development teaching as it provides the opportunity for self-reflection. In addition, Parikh, Janson, and Singleton (2012), after completing their qualitative study on video journaling, advocated that reflective video journaling supported reflective practices within the counselor development process. To facilitate the development of self-awareness among nursing students in the leadership course, I designed a video assignment for the course. The assignment required students to conduct an online self-assessment on personal strength and leadership styles, understand the findings and then create a video explaining their perceptions on personal strength and leadership styles. The goal was for the learners to enhance their self-awareness by verbalizing their thinking and refining their thinking through self-reflection by watching their personal videos individually, with their friends, family, or colleagues.

Lessons Learned from Incorporating Video Assignments in a Nursing Leadership Course

• Assignment criteria refinement: Once I created the draft assignment criteria, I connected with Writing Center (WC) to refine the language used in the assessment criteria to facilitate students’ understanding. A second reason was to ensure the alignment between WC and the instructors’ expectations so that the WC would have reference to support students effectively.

• Rubric development: Developing a rubric is not an easy process especially for a novice educator. It required several iterations with input from faculty members in the Nursing and Foundation program as well as the Centre for Teaching and Learning Center (CTL).

• Resources for students: Members of WC extended their support by coming to the leadership class to inform students of the support they can provide. In addition, they brought a student peer mentor who presented video taking tips which encouraged students to ask more questions to clarify their concerns. Upon request, faculty from the CTL spoke to the class and facilitated the discussion on how to create a video. Students found both sessions very informative and practical.

• Grading scheme: When I started grading videos, I found students to be very creative in selecting location, ambiance, background, attire, and in their unique presentation styles. I had to develop a process which helped me be consistent, efficient, fair, and accurate, which is why the development of assessment criteria was very important. After grading all the videos, I was able to identify opportunities to improve the marking scheme, statements written on the rubric, and assignment criteria for next leadership course.

• Engagement: Throughout the video making process, we, the students and I, remained fully engaged and active. Students asked different kinds of questions in every class. Answering their specific questions refined my thinking and helped me learn about students’ perspectives. Students in the course involved their spouse, children, family members, colleagues, friends, and household help in their video making process which they did not anticipate and they were excited to share. As a result, everyone became aware of students’ personal strengths and leadership styles.

Throughout the process I was excited, remained very engaged with students’ experiences, and felt proud of their performances. I believe I have achieved the objective of enhancing students’ self-awareness through self-reflection by using an active learning strategy during the process of this video assignment. I received critical feedback from students about what they liked or found challenging. Overall, it was a great experience, I would highly recommend the use of video assignments in leadership courses.

External Partnerships: Academic Institutions and Hospitals

Pamela Zielinski, NP, MBA - Nursing Instructor

Businesses in all areas and sectors cannot function without strong, meaningful, and mutually beneficial relationships with their stakeholders (Håkansson and Ford, 2002), universities included. This piece will evaluate the external partner’s subsector of stakeholder relationships of the University of Calgary,
in Qatar (UCQ). UCQ is a satellite campus of University of Calgary (UC) in Calgary, Alberta, Canada. UC is a research-intensive university offering a multitude of study areas, whereas UCQ offers nursing degrees only. Comprised solely of the Faculty of Nursing, it offers both under-graduate and graduate programs, with a total enrollment of approximately 450 students, over 140 employees, ~40 of which are from Canada to enhance the quality of nursing education in Qatar (University of Calgary in Qatar, 2017). The student population is comprised of residents of Qatar, which includes both Qatari and non-Qatars (University of Calgary in Qatar, 2017). UC was invited in 2008 under a special private exchange relationship (Kotler and Keller, 2016) to open a satellite campus by the Qatari Government (QG). The strategic goal is to increase the “home grown” nursing workforce by 2030 as part of Qatar National Vision (Qatar National Vision 2030, 2008). This article will examine the external partner relationships between UCQ and Qatar’s largest health care provider, Hamad Medical Corporation (HMC), by discussing the role each plays and how UCQ nurtures this vital relationship.

Evaluation of Key Stakeholder: Hamad Medical Corporation

UCQ engages in a private exchange supplier relationship with HMC which is the government owned and operated public health care facilities provider in Qatar (Kotler and Keller, 2016). Nursing education requires each student to spend hundreds of hours in hospitals gaining hands-on skills and knowledge. Without relationships with hospital organizations such as HMC, nursing schools would be unable to provide this vital part of a nursing education, thereby decreasing the value of their mandate – providing a well-trained, experienced, and hospital ready nurse (Gkantar et al., 2016). As such, UCQ relies on HMC to help provide this very important hands-on practice within their centres, including access to patients and other health care staff that nursing students interact with. Meanwhile UCQ provides educators that prepare students for this experience and subsequent supervision.

These vital relationships rest on various pillars with trust being at the core of the relationship (Morgan and Hunt, 1994). According to Håkansson and Ford (2002) and Möller and Halinen (1999), it is vital that business units exist on relationships, as relationships are likely to be complex and long-term because of increasing technology and globalization. Mitręga (2012) mirrors these theories suggesting that “stable and ongoing suppliers” are more beneficial to business relationships, than the opposite (p. 486). In addition to Morgan and Hunt’s (1994) presentation of trust and commitment as the pillars to business relationship success, Wang and Zhang (2017) argue that if companies have mutually beneficial values then they will have a higher functioning and productive relationship. UCQ models these academic theories by building in long-term operational outcomes, mutually beneficial key performance indicators with agreement from HMC, and by focusing on positive relationship building. To provide one example, both UCQ and HMC have voting members from both sides of the relationship on multiple of their committees, which helps collaboration and builds trust. Mouzas, Henneberg and Naudé (2007) emphasize the importance of trust as the foundation and pillar of the business relationship because trust can easily be eroded.

The UCQ-HMC dyad is a dynamic relationship built on trust and mutual understanding and is beneficial to both parties. The support that UCQ receives from this vital stakeholder ensures UCQ’s success at providing Qatar with the knowledgeable nurse leaders that it requires for the health of its residents.
Nursing Conferences

28th International Congress on Nursing Care & Nursing Education
- When & Where: July 08-09, 2019. Osaka, Japan
- Theme: Progressive Strategies and Leading Habitudes for Nursing Care
- Website: https://nursingcareplan.nursingconference.com/

52nd Annual Nursing Research and Evidence Based Practice Conference
- When & Where: August 19-20, 2019. Singapore
- Theme: Advanced and Emerging Issues in Nursing Research and Evidence Based Practice
- Website: https://evidencebasedpractice.nursingconference.com/

50th International Conference on Advanced Nursing Research
- When & Where: September 10-11, 2019. Prague, Czech Republic
- Theme: Exploring New Horizons in Nursing and Research
- Website: https://advancednursing.nursingconference.com/

23rd International Conference on Global Nursing Education & Research
- When & Where: September 16-17, 2019. Tokyo, Japan
- Theme: Innovative Ideas and Approaches in Nursing Education
- Website: https://nursingeducation.conferenceseries.com/

23rd Asia Pacific Nursing Education Congress
- When & Where: October 16-17, 2019. Seoul, South Korea
- Theme: Current Challenges and Innovations in Nursing Education
- Website: https://education.nursingmeetings.com/

28th World Nursing Education Conference
- Theme: Consolidating Recent Innovations and Knowledge in Nursing Education
- Website: https://nursingeducation.nursingconference.com/

37th Global Nursing Care and Education Conference
- When & Where: December 06-07, 2019. Montreal, Canada
- Theme: Exploring latest advancement in Nursing Education and Digital Health
- Website: https://nursingcongress.conferenceseries.com/
Be on the lookout for CTL emails on the events below!

Check the SharePoint site for current dates, location and times - https://intranet.ucalgary.edu.qa/sites/ucq/default.aspx

University Teaching and Learning Certificate
A comprehensive program on teaching and learning in the health sciences classroom and clinical setting, facilitated by faculty from Nursing, Foundations and the Centre for Teaching and Learning. Accredited by QHCP, the program provides foundational knowledge of evidence-based pedagogical practices through learning sessions on lesson planning, curriculum development and alignment, teaching and learning strategies, assessment, teaching in clinical settings, as well as teaching second language learners.

“Monday Talk Series”
“The Monday Talk” series is an informal, supportive, and friendly way to discuss and share knowledge related to teaching and learning in the classroom and clinical practice. The idea is to share a peer review journal article relevant to teaching and learning and facilitate meaningful discussions. The objectives of this activity include developing a community of practice, learning about research trends and methodologies, and integrating evidence into practice all with an aim of enhancing teaching and learning on our campus. We are looking suggestions for topics and for guest facilitators for various sessions throughout 2019. Please email Alina Botis - valeriaalina.botis@ucalgary.edu.ca

Grants Drop-In Consultation Sessions
This session provides an opportunity for Grant applicants to ask questions and consult on their proposals for the University of Calgary Teaching and Learning Grants Program. For an appointment to discuss your grant proposal or ideas, email Dr. Frances Kalu – fukalu@ucalgary.ca

UCQ Teaching Squares
Teaching Squares provide a safe confidential space to build community and improve your teaching skills through non-evaluative teaching observations and self-reflection. Each teaching square would include three participating faculty and a member of the Centre for Teaching and Learning. We will engage in an initial meeting, identification of objectives for observations, square shares, reflection and implementation. Interested? Kindly send an email to Frances – fukalu@ucalgary.edu.qa.

Teaching Awards Drop-In Consultation Sessions
Are you interested in or applying for the 2020 University of Calgary Teaching Awards? This session provides an opportunity for you to learn more about the awards program, developing your nomination package, teaching philosophy statement and teaching dossier. For an appointment to discuss your Teaching Awards application, email Dr. Frances Kalu – fukalu@ucalgary.ca

Lunch n’ Learns
Nursing faculty member present on various topics not limited to simulation, supervising graduate students, research, experiential learning amongst others. We are open to ideas of new topics and the CTL will work with you to develop and deliver the sessions.

Research Group Sessions
The Research Group with the theme – Bridging the gap: From research idea to grant proposal, provides a supportive and collaborative space for faculty members to develop a research proposal. The intent is to build research capacity amongst faculty members through learning sessions on the research design process to guide the systematic development of a research proposal for submission to any granting agencies or for unfunded research.
# The What, Why, and How of Critical Thinking Approach in Nursing Education


## In class participation: To grade or not to grade?


Using Personal Videos to Enhance Self-awareness through Reflection


External Partnerships: Academic Institutions and Hospitals


The purpose of *CTL Newsletter* is to share research, ideas, and insights into teaching and to build a community of educators.

The CTL extends a special thank you to the authors of this edition.

If you are interested in writing for the next edition, we are looking for contributors who have:

- successfully tried a new teaching idea in class
- observed a class that used a great teaching strategy
- tested a new assessment strategy that was successful
- attended a workshop at UCQ or elsewhere that others might find useful
- read an article about teaching that others should know about
- conducted research on their teaching that they would like to share.

**Submission guidelines**

- All articles must be related to teaching, the scholarship of teaching and learning, or education and they must be relevant to the UCQ context.
- If citations are used, they must be formatted according to APA style.
- All articles submitted are subject to editorial review.
- The deadline for submission for the next edition will be announced.

If you would like more information, want to discuss your ideas, or are interested in becoming part of the editorial board for the newsletter, please contact Dr. Frances Kalu, fukalu@ucalgary.edu.qa, Alina Botis, valeriaalina.botis@ucalgary.edu.qa, Dr. Gilles Doiron, jagilles.doiron@ucalgary.edu.qa or Angela Waigand, auwaigan@ucalgary.edu.qa.

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