



School of Graduate Studies

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To : Members of Graduate Council
From : Christina Bryce
Assistant Graduate Secretary

The next meeting of Graduate Council will be held on **Tuesday September 14th at 9:30 am via Zoom.**

Listed below are the agenda items for discussion.

Please email cbryce@mcmaster.ca if you are unable to attend the meeting.

A G E N D A

- I. Minutes of the meeting of May 18th, 2021
- II. Business arising
- III. Provost and Vice-President Academic, Dr. Susan Tighe
- IV. Report from the Vice-Provost and Dean of Graduate Studies
- V. Report from the Graduate Associate Deans
- VI. Report from the Associate Registrar and Graduate Secretary
- VII. Graduate Expectations Arising from the McMaster Vaccine Policy
- VIII. New Program Proposal – M.Sc. in Midwifery
- IX. Changes to Scholarship
- X. Delay in Instituting the Mandatory Thesis Requirement of the Research Plagiarism Checking Policy

Graduate Council
Tuesday May 18th at 9:30 am via Zoom

Present: M. Thompson (Acting Chair), S. Hanna, M. Horn, K. Hassanein, B. Gupta, M. Dion, A. Shi, S. Raha, B. Farmer, M. Parlar, S. Madeiros, S.K. Dhami, K. Tsang, E. Wright, N. Tan, J. Shedden, AM. Naisani, J.P. Xu, J. West-Mays, M. Stroinska, C. Davidson, S. Qian, S. Baschiera (Associate Registrar and Graduate Secretary), C. Bryce, (Assistant Graduate Secretary)

Regrets: J. Gillet, S. Brophy, O. Loertscher

I. Minutes of the meeting of April 20th, 2021

It was duly moved and seconded, **‘that Graduate Council approve the minutes of the meeting of April 21st, 2021.’**

The motion was **carried**.

II. Business arising

There was no business arising.

III. Report from the Vice-Provost and Dean of Graduate Studies

Dr. Thompson reported on the following items:

- The provincial lockdown and related impacts for on campus activities;
- The vaccine age eligibility had been lowered, so everyone over 18 can now get vaccinated;
- The hope for as much in person activity as possible for fall 2021;
- Updates on international student arrivals;
- eCampus Ontario call for microcredential proposals for funding under the Challenge Fund;
- The Facilitated Admissions working group which is focusing on developing an equity framework for grad admissions;
- Admission acceptance numbers are up significantly at both the Masters and Ph.D. levels.

Council members discussed enrollment caps and how the higher acceptances would affect funding.

IV. Report from the Graduate Associate Deans

Dr. Hassanein (Faculty of Business) reported on the following items:

- Planning for the fall term, including what would be in person versus online;
- All grad programs experiencing increase in applications.

Dr. Horn (Faculty of Humanities) reported on the following item:

- A sharp rise in accepted offers.

Dr. Hanna (Faculty of Health Sciences) reported on the following items:

- Microcredentialling Challenge Fund, noting a remarkable number of ideas being discussed;
- The upcoming Faculty of Health Sciences Research Plenary.

Dr. Gupta (Faculty of Science) reported on the following item:

- Concerns around international student arrivals.

Council members discussed the potential of more students to go overtime as a consequence of pandemic restrictions, the potential timing of this issue and the relative higher impact on those engaged in in-person research. Members also discussed the need to be clear that students know there is support available to them.

V. Report from the Associate Registrar and Graduate Secretary

Ms. Baschiera reported on the following items:

- The upcoming June Convocation;
- The opening of enrollment in early July;
- The admissions project, noting that end to end demos had been well-received and user acceptance testing was starting in the coming weeks;
- Work to formalize academic standing on the system;
- The admin tools outage.

VI. Faculty of Health Sciences Graduate Policy and Curriculum Committee Report

Dr. Hanna reported three items for approval

- Changes to elective courses for Biomedical Engineering;
- Changes to calendar copy for Child Life;
- Change to admission requirements for Physiotherapy where they are now allowing for research methods or statistics rather than just statistics as had been required previously.

It was duly moved and seconded, **‘that Graduate Council approve the changes proposed by the Faculty of Health Sciences as described in the documents’.**

The motion was **carried**.

VII. Faculty of Science Graduate Curriculum and Policy Committee Report

Dr. Gupta reported on the following items for approval:

- Change in calendar copy for Biology;
- Change to Comprehensive Examination in Chemical Biology;
- Change in course requirements for Chemistry to add a new course as a requirement;
- Change in calendar copy from Kinesiology to clarify electives from other programs;
- New Streams in Radiation Sciences.

It was duly moved and seconded, ‘that Graduate Council approve the changes proposed by the Faculty of Science as described in the documents’

The motion was **carried**.

VIII. Spring 2021 Graduands

It was duly moved and seconded, **‘that Graduate Council approve the list of the 2021 Spring Graduands, with amendments/corrections to be made as necessary by the Associate Graduate Registrar.’**

The motion was **carried**.

There being no other business the meeting was adjourned.

GRADUATE EXPECTATIONS ARISING FROM THE MCMASTER VACCINATION POLICY

The ongoing COVID-19 pandemic has resulted in unique infection risks and serious health consequences. This academic regulation has been developed to comply with public health regulations and McMaster's Vaccination Policy.

In order to be/remain enrolled in a McMaster program, all graduate students must provide proof that they are fully vaccinated or obtain an exemption from the University on the basis of substantiated human rights grounds. Students are encouraged to complete this process as soon as possible.

Students in placements, cooperative work experiences or other external experiential course requirements *may* have to comply with additional external vaccination policies at their worksite or study site. Students in the Faculty of Health Sciences who are involved in learning in the clinical environment must also meet requirements under the FHS Policy Regarding Submission, Verification, and Sharing of COVID-19 Vaccination Status for Learners in Clinical and Workplace-Based Placements.

FOR FALL TERM 2021 AND SUBSEQUENT TERMS DURING ACADEMIC YEAR 2021/22

1. All students are required to visit the **MacCheck** digital tool to register their vaccination information as soon as possible. The deadline for submitting a request for exemption is September 19, 2021 at 11:59 p.m. ET. This requirement applies to all registered graduate students, regardless of whether or not they have any on-campus coursework or research activity during Fall Term 2021.
2. Students who have uploaded proof of their vaccinations, or have received an exemption from the University, will be able to continue their enrolment in Fall Term 2021 and future terms during academic year 2021/22.
3. **Students must also complete the daily MacCheck screening within the hour before accessing University property for any reason.** A successful screening result on MacCheck is required for any visit to campus.
4. Enrolment in the Fall Term 2021 will be cross-checked between September 7th and October 18th to identify those students who have not met the requirements of the McMaster Vaccination Policy.

Beginning October 18th, graduate students enrolled for Fall Term 2021 who have not completed their vaccinations or who have not received an exemption from the University **will be "withdrawn in good standing"**. (International graduate students enrolled in programs but not yet able to arrive in Canada due to study permit delays will not be subject to the Oct 18th deadline.)

- a) Students who are withdrawn will receive tuition reimbursement (net of scholarship and stipend arrangements at October 31st) for Fall 2021 and registration in degree components for the term will be removed from their transcript.
- b) Students enrolled in programs whose degree offerings are designated by the program to be entirely virtual in Fall 2021, will be allowed to remain enrolled until Dec 31st.

- c) Students with OSAP are also encouraged to contact the Registrar's Office to understand any OSAP implications.

 - d) Students who are in the final term of their degree (i.e. expecting to complete all remaining degree requirements in Fall 2021) and have no reason to be on campus will be allowed to remain enrolled and complete their degree. Graduate program offices will be consulted by the School of Graduate Studies to verify completion expectations. In the event of unanticipated delays in completion, a student should be directed to the Associate Dean of the Faculty hosting the graduate program for guidance.

 - e) Questions regarding the prospects for future readmission should be directed to the Associate Dean of the Faculty hosting the graduate program.
- 5. Any student found to be in violation of the Vaccination Policy is prohibited from accessing University Property and may be subject to outcomes and/or sanctions under the *Code of Student Rights and Responsibilities*.**

McMaster University



NEW PROGRAM PROPOSAL

Master's Degree

Midwifery

March 8, 2021

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COMPLETING THE NEW PROGRAM PROPOSAL DOCUMENT

This New Program Proposal template is structured to correspond with the evaluation criteria outlined in McMaster's Policies, Procedures and Guidelines:

<https://www.mcmaster.ca/policy/AdminAcad/AcadAdmin/AcademicProgramReview.pdf>.

For additional information, contacts or guidebooks, departments can visit the IQAP website <https://mi.mcmaster.ca/iqap/> or email iqap@mcmaster.ca.

Please ensure that your department refers to the New Program Proposal Guidebook for clarification and further information on the types of evidence required and, where applicable, what resources are available to assist in retrieval or interpretation of the information required for this proposal.

CHECKLIST FOR NEW PROGRAM PROPOSALS

The following section indicates all the items that are required as part of a **complete** new program proposal package which includes all the necessary documents. Part I, II and III should be submitted as separate files to iqap@mcmaster.ca.

PART I: COMPLETE NEW PROGRAM PROPOSAL DOCUMENT

- Complete New Program Proposal Template
- Faculty CVs (can be submitted on CD or USB)
- Memorandum(s) of Understanding (Letters of Support) (if applicable)

PART II: RESOURCE IMPLICATIONS AND FINANCIAL VIABILITY TEMPLATE

- Completed
- Approved

PART III: FEES MEMO

- Completed
- Approved

Chair's Declaration of New Program Proposal Completeness:

I, Dr. Nick Leyland, have reviewed the New Program Proposal for an M.Sc. (Midwifery) and agree that it is complete and satisfies all of the requirements McMaster University's Policy on Academic Program Development and Review.

Signature:

Executive Vice Dean and Associate Vice President Academic's Declaration of New Program Proposal Completeness:

I, Susan Denburg, have reviewed the New Program Proposal for an M.Sc. (Midwifery) and agree that it is complete and satisfies all of the requirements McMaster University's Policy on Academic Program Development and Review.

Signature:

1 PROGRAM

1.1 PROGRAM DESCRIPTION

We are proposing a Master's of Science degree in Midwifery. Conceptualization of the program is based on the following research-based description of "advanced midwife practitioners":

"Four major attributes of advanced midwife practitioners (AMPs) are identified:

- *autonomy in practice,*
- *leadership,*
- *expertise, and*
- *research skills.*

*A consensus was found on the need of preparation at master's level for AMPs. Such midwives have a broad and internationally varied scope of practice, fulfilling different roles such as clinicians, clinical and professional leaders, educators, consultants, managers, change agents, researchers, and auditors."*¹

The program will target midwives from Canada and abroad who wish to acquire an advanced body of knowledge and skills that will prepare them for leadership roles within the profession. Such roles include, but are not limited to, clinical and professional leaders, educators, researchers, and clinicians with specialized advanced clinical skills. As described in greater detail in Section 1.6, the program aims to address a societal need in Canada for midwives to play an increased role in leadership within health systems. It will also provide the option to develop discrete advanced clinical skills through elective courses. The program content derives from the major attributes of advanced midwife practitioners listed above, including autonomy in practice, leadership, expertise, and research skills. Graduates will critically integrate new knowledge and skills and contribute to the international body of scholarship about the impact of quality midwifery care.

The program will offer both a course-based and a thesis-based option for completing the degree, as well as a choice between full-time or part-time studies. The program structure is designed to support the participation of international students and/or midwives who are working by offering a flexible and accessible learning schedule and a part-time option. The modes of program delivery will include a blended model of in-person and online formats. All students will complete an initial week-long in-person residency followed by completion of three additional 3-unit core courses online, and a second residency week course in a synchronous online format. Students in the thesis option will complete an additional 6 units of electives and the thesis, whereas students in the course-based option will complete an additional 12 units of electives and a capstone portfolio.

1.2 PROPOSAL PREPARATION AND CONSULTATION PROCESS

This proposal was developed by a working group of faculty, instructors, and adjunct clinical faculty involved in the McMaster Midwifery Education Program, which included Liz Darling RM PhD, Carol Cameron RM MMid, Abigail Corbin RM MHM, Kate Demers RM MMid, Anne Malott RM PhD, Helen McDonald RM MHSc, Beth Murray-Davis RM PhD, Claire Ramlogan-Salanga RM, and Kathi Wilson RM MSc.

¹ Goemaes R, Beeckman D, Goossens J, Shawe J, Verhaeghe S, Van Hecke A. Advance midwifery practice: An evolutionary concept analysis. *Midwifery* 2016;42:29-37. [https://www.midwiferyjournal.com/article/S0266-6138\(16\)30148-6/pdf](https://www.midwiferyjournal.com/article/S0266-6138(16)30148-6/pdf)

Additional input was provided by Karyn Kaufman, DrPh, Professor Emerita and founding director of the McMaster Midwifery Education Program.

Consultations at McMaster were also held with the following people:

- Child Life & Pediatric Psychosocial Care (Cathy Humphreys)
- Global Health (Andrea Baumann)
- Health Management (Glen Randall)
- Health Research Methodology (Mitch Levine)
- Health Science Education (Lawrence Grierson)
- MacPherson Institute – IQAP (Amy Gullage)
- McMaster Health Sciences Library (Jennifer McKinnell)
- Nursing (Nancy Carter)
- Public Health (Emma Apatu)
- Rehabilitation Sciences (Dina Brooks)
- Indigenous Health Initiative (Bernice Downey)

Letters of support have been provided from Nursing, Health Research Methodology, Health Science Education, Public Health, and Rehabilitation Sciences to confirm that students in the proposed program would be able to take elective courses in their programs (see Appendix A).

We have also consulted within the profession of midwifery in Canada. Section 1.6 reports the findings of a survey of Canadian midwives that we conducted as part of our consultations. Letters of support from the Canadian Association of Midwives, the College of Midwives of Ontario, and the Association of Ontario Midwives also demonstrate support from midwifery stakeholder organizations at the provincial and national level. Letters of support from several hospitals confirm support in the broader health sector. (Letters of support are in Appendix A.)

1.3 CONSISTENCY WITH MCMASTER’S MISSION AND ACADEMIC PLAN

I. McMaster’s Strategic Mandate Agreement:

The proposed Master’s degree program builds on one of McMaster’s existing areas of focus: *51-Health professions and related programs*. While the degree targets students from a single health profession (midwifery), the curriculum reflects McMaster’s institutional strength and focus on leveraging strengths to advance human and societal health and well-being through interdisciplinary learning. The program will draw on scholarship from the fields of business and health management, social sciences, epidemiology, health services, and health policy as well as building on the body of knowledge of midwifery. Students in the program will receive a comprehensive and integrated education that will prepare them to apply new knowledge to lead innovation in the health system that addresses pressing and emerging challenges. The proposed program will be housed within the Faculty of Health Sciences and will add new graduate level training to build on an existing program within the School of Medicine (i.e., the Midwifery Education Program). The program will provide all students the opportunity to participate in experiential learning which will support readiness to successfully apply new knowledge and skills in the work environment upon graduation. Learning activities throughout the program will support the development of skills and competencies that are directly applicable to job roles that graduates will assume. Students will undertake real world projects that contribute to improvements in health care as part of the program. The degree will

equip students not only with leadership skills that will prepare them for leadership roles in the workforce, but also to be engaged and successful global citizens.

II. **McMaster's current priorities:**

The Master's degree in Midwifery will align with multiple areas of McMaster's institutional priorities as articulated in the university's mission and vision, as well as themes identified through President Farrar's recent consultation with the university community.

Innovation in Teaching and Learning Excellence - This degree will be the first graduate level degree in midwifery in Canada. The McMaster Midwifery Education Program is a leader in developing unique, high quality continuing clinical educational opportunities for practicing midwives (e.g., surgical assistant in obstetrics, point of care ultrasound, etc.). These courses have been developed through interprofessional collaboration with other disciplines (e.g., obstetrics, radiation sciences) and provide a foundation of excellence in teaching practicing midwives upon which we will build. The program will primarily be offered in an online format that will make it accessible to students at a distance and to part-time students who wish to work while studying. Experiential education, in the form of clinical placements and leadership placements will provide excellent opportunities for students to apply knowledge and consolidate skills.

Access and Equity - Equity and inclusion will be a key theme of the curriculum. Its centrality will be established in a required course that addresses social justice and inclusive leadership and prepares graduates to be able to lead with empathy and compassion. Access to the program for a broad spectrum of students will be facilitated by offering a primarily online format and a part-time option. A facilitated admissions processes for Indigenous applicants and Black applicants will reduce structural barriers that limit the participation of Indigenous people and Black people in graduate studies. The proposed program aligns with the Faculty of Health Sciences [Indigenous Health Education Strategic Plan](#).

Research Excellence and Impact - The program faculty are members of the McMaster Midwifery Research Centre (MMRC), the first such centre in Canada, and are leading researchers in the field nationally. The MMRC members have a strong track record of supervising graduate students from other Faculty of Health Sciences' programs with respect to degree completion, publication, and obtaining student research funding. Students in the master's degree will participate in activities of the MMRC and will be involved in cutting-edge midwifery research.

Innovation, Economic Development and Community Engagement - The program has been developed to address a need within the health system for midwives to take on leadership roles to improve access to high quality sexual and reproductive health care. The program will enable students to develop skills to lead health system innovation while being flexible and adaptable to best meet the needs of the communities that they serve. A key component of the curriculum will address community engagement, and how to lead health care change that meets community needs. Students will also have the opportunity through elective courses to acquire specific advanced skills to enable them to address specific gaps in sexual and reproductive health care in their community.

Enrollment Strategy - The degree will target students from across Canada and international students in

addition to those from Ontario. The primarily online format will allow the participation of students who live and work outside the Hamilton area. The participation of students from multiple jurisdictions will enrich the interactive components of the program. The experience and contributions of international students will expose Canadian students to ideas that might be used to strengthen the contributions of midwives in Canada and vice versa. The participation of international students will also raise the stature of McMaster University within the midwifery profession both nationally and internationally.

1.4 PROGRAM LEARNING OUTCOMES

Upon completion of the MSc in Midwifery, students will be able to:

- 1) critically evaluate research methods and the validity of key assumptions and evidence (PLO1),
- 2) apply theoretical knowledge to plan, implement, and lead change within health care settings to transform systems and achieve results (PLO2),
- 3) apply concepts of social justice as a leader and to promote equitable sexual and reproductive health care that meets community needs (PLO3),
- 4) advocate for and lead expansion of the role and contributions of midwives in health systems (PLO4),
- 5) communicate effectively as a leader using both written and oral communication strategies (PLO5),
- 6) apply knowledge to evaluate initiatives in a health care setting or conduct original research to advance scholarship within the field of midwifery (PLO6), and
- 7) demonstrate critical analysis and expertise in a focus area of midwifery leadership (e.g., advanced practice, professional leadership, midwifery education, midwifery research) (PLO7).

1.5 CONSISTENCY WITH DEGREE LEVEL EXPECTATIONS

A detailed description of how each of the program learning outcomes maps onto the degree level expectations and the associated teaching activities and assessment methods is provided in Section 5.2. In the table below we have provided a broad description of how each of the degree level expectations will be met or exceeded, and how this aligns with the Program Learning Outcomes listed in Section 1.4.

How the program addresses master’s degree level expectations	Alignment with Program Learning Outcomes
<p>1. Depth and Breadth of Knowledge Students will demonstrate understanding of current issues pertaining to the role of midwifery within health systems and factors influencing those issues, and of current scholarship pertaining to health care leadership and social justice within health care and how these bodies of knowledge can be applied within the midwifery profession. Students will also gain an understanding of health research methodology and will demonstrate the ability to apply this knowledge. The core body of knowledge for this degree will be covered in the five core courses (two residencies, and three asynchronous courses). Students will develop</p>	<p>PLO1 PLO2 PLO3 PLO6 PLO7</p>

additional depth of knowledge in an area of focus of their choosing through their elective courses and thesis or capstone portfolio. Potential areas of focus include advanced clinical practice, professional leadership, midwifery education, and midwifery research.	
<p>2. Research and Scholarship</p> <p>Students will demonstrate the ability to apply and generate research and scholarship within the field of midwifery to address complex issues. They will produce written work that develops and supports a sustained argument, and critically evaluate and apply knowledge to original real-world problems as part of the major written assignments in core courses. They will acquire the ability to apply established techniques of research and inquiry to evaluate health system innovations and continuous improvement endeavors to generate new knowledge.</p>	<p>PLO1 PLO2 PLO3 PLO6 PLO7</p>
<p>3. Application of Knowledge</p> <p>Students will demonstrate competence to apply the body of knowledge they acquire to critically analyze new questions and novel problems. This will be demonstrated throughout all components of the program through written and oral assignments and interactions (e.g., discussion forums). Students will demonstrate the specific ability to critically analyze and apply knowledge to: 1) plan the implementation of health system innovation and/or improvement, 2) address social inequity in health care, and 3) evaluate continuous improvement or innovation initiatives. These skills will be developed through major written and oral assignments in core courses in which students apply knowledge to examine unique problems.</p>	<p>PLO1 PLO2 PLO3 PLO4 PLO6 PLO7</p>
<p>4. Communication Skills</p> <p>Students will demonstrate strong communication skills that can be applied within a variety of midwifery leadership roles. Students will build and demonstrate these skills through participation in asynchronous discussion forums with peers, write independent written assignments, make oral presentations, and produce either a capstone portfolio or a thesis.</p>	<p>PLO4 PLO5 PLO7</p>
<p>5. Awareness of Limits of Knowledge</p> <p>Students will demonstrate cognizance of the complexities of knowledge and of the potential contributions of other interpretations, methods, and disciplines throughout the program. Interactions with peers and faculty will help to support this awareness.</p>	<p>PLO1 PLO6 PLO7</p>
<p>6. Autonomy and Professional Capacity</p> <p>Students will demonstrate personal responsibility, accountability, ethical behaviour, and academic integrity in meeting the requirements of the degree. They will develop skills to support decision-making in complex situations and the intellectual independence required to support life-long learning and continuing professional development. Course content on personal leadership skills will specifically foster these abilities and will be applied in the development of a personal leadership vision that will form the basis of one of the assignments for the second residency. Major assignments in core courses will support students to develop transferable skills and the ability to intelligently apply knowledge in particular contexts. These skills will support graduates to assume a range of different kinds of leadership roles within the midwifery profession, including advanced clinical practice, clinical and hospital leadership, midwifery education, and midwifery research.</p>	<p>PLO2 PLO3 PLO4 PLO5 PLO6 PLO7</p>

1.6 DEMAND FOR PROGRAM

I. EVIDENCE OF SOCIETAL/LABOUR MARKET NEED

The profession of midwifery was first regulated in Canada in the province of Ontario in 1994. Midwives now attend >10% of births across Canada, and that proportion is higher in British Columbia (22%) and Ontario (16%). The profession is growing rapidly and is now regulated and funded in all Canadian jurisdictions except PEI and the Yukon.² In 2019, there were 1909 registered midwives in Canada, 976 of whom are in Ontario.² Demand for midwives is high. In Ontario, there has consistently been a 100% employment rate for graduates of the Ontario undergraduate midwifery education programs who are seeking work.

Globally, midwives play an essential role in working towards achieving universal health care by 2030.³ The scope of midwives is recognized internationally to extend beyond care during pregnancy and birth to include family planning and other sexual and reproductive health services,⁴ and midwives have the knowledge and skills to provide 87% of sexual, reproductive, and health services.⁵ However, significant expansion of the midwifery work force will be required to meet the 2030 goal of universal health care. The International Confederation of Midwives has identified that increased midwifery leadership is a strategic priority that will be key to the successful expansion of the profession.⁶ Around the world, there is a need to train midwives to support them to successfully move into leadership positions.⁶

Across Canada, there are significant geographical and social inequities in access to sexual and reproductive health care, particularly for young, immigrant, LGBTQI2S, economically-disadvantaged, Indigenous, persons with intellectual and developmental disabilities, and uninsured people. Midwives in Canada remain an underutilized resource that could be used to improve access to appropriate, high quality sexual and reproductive health care. One example where this is beginning to occur is in the renewal of Indigenous midwifery. Indigenous midwives are bringing birth back into Indigenous communities in ways that support the regeneration of Indigenous families and the health and safety of communities.⁷ In Canada, Indigenous midwives are leaders in providing care across the lifespan and have much to offer non-Indigenous midwives in demonstrating how this can be done. At the same time, there remains a pressing need to expand the availability of Indigenous midwifery services to more communities. The proposed master's program will support both Indigenous and non-Indigenous midwives to develop leadership skills that will

² Canadian Association of Midwives. <https://canadianmidwives.org/midwifery-across-canada/>, accessed December 31, 2020

³ The importance of midwives in achieving universal health coverage. <https://www.wilsoncenter.org/event/importance-midwives-achieving-universal-health-coverage>, accessed January 29, 2021.

⁴ The status of nursing and midwifery in the world (Editorial). *The Lancet* 2020; 395:1167.

⁵ World Health Organization. The case for midwifery. https://www.who.int/maternal_child_adolescent/topics/quality-of-care/midwifery/case-for-midwifery/en/, accessed January 29, 2021.

⁶ International Confederation of Midwives. Strategic Plan 2021-2023. https://www.internationalmidwives.org/assets/files/general-files/2021/01/2021---2023-icm-strategic-plan-eng-ext_final.pdf, accessed January 29, 2021.

⁷ The National Aboriginal Council of Midwives. Indigenous Midwifery. <https://indigenousmidwifery.ca/indigenous-midwifery-in-canada/>, accessed on January 29, 2021.

enable them to make meaningful contributions to addressing societal inequities in access to sexual and reproductive health care.

At this point in the development of the profession in Canada, the following factors support the need for a master's degree in Midwifery:

1. Expertise and Autonomy in Practice:

The midwifery scope of practice across Canada has expanded over time to include advanced skills (e.g., surgical assist, point of care ultrasound, intrauterine contraceptive device insertion, etc.) that are additional to the core competencies of the profession and not part of the skill set of all midwives. Advanced skills are not included in the curriculum of undergraduate programs that prepare midwives for entry to practice, so midwives must seek out continuing education to add them to their skill set. Midwives who take continuing education training courses in advanced skills face barriers in finding opportunities for hands-on practice in clinical settings following didactic training and simulation as well as barriers within the health system to integrating these skills in practice (e.g., due to systemic issues such as funding). Incorporating advanced skills training as elective courses options in our proposed program supports expansion of this expertise within the profession. Furthermore, McMaster's existing clinical placement network will facilitate access to placement opportunities to consolidate skills while the program's core courses will provide graduates with skills to support successful implementation of new services.

Midwives are also taking on new clinical roles in health systems (e.g., integrating into inter-professional teams, and providing collaborative care to populations with complex needs). Research on pilot projects in Ontario indicate that integrating midwives into expanded clinical roles leads to excellent clinical outcomes, high levels of satisfaction for clients, improved access to care for underserved populations, more appropriate care for populations who are marginalized, improved retention of midwives in the work force, and high levels of satisfaction among health care providers.⁸ The master's degree that we propose will not only prepare midwives for these roles, but will provide them with the leadership skills to create new roles where they do not yet exist.

McMaster midwifery faculty members have led the creation a new midwifery clinical service that is integrated into the Crown Point Family Health Team in an underserved neighbourhood in Hamilton. The midwives working in this service are providing a range of services including intrauterine contraceptive device insertion, medication abortion, menopausal counselling, and postpartum mental health peer support groups. This is one example of kinds of clinical sites where we will be able to arrange clinical placements for students.

2. Leadership:

Strong evidence demonstrates that effective leadership in healthcare improves patient safety, patient experience, clinical outcomes, workforce engagement, retention and more.⁹ The International

⁸ Darling EK. Improving Access to Midwifery Care in Canada: Research Insights to Shape the Future. McMaster Midwifery Research Symposium. Hamilton, ON: Oct 26, 2020.

⁹ Corbin A, Darling EK, Pearce-Kelly T, Wise K. Health leadership competencies for health leaders around the world and their application to the Canadian midwifery profession: a scoping review. *Canadian Journal of Midwifery Research and Practice*. (Accepted for publication)

Confederation of Midwives recognizes the need for leadership growth within the midwifery profession around the globe and identified leadership as one of their strategic objectives from 2017-2020.¹⁰

Twenty-six years into the integration of midwifery in the Ontario health system, midwives remain under-represented in administrative hospital leadership roles. The successes of hospitals where midwives have taken on these roles (e.g., [Markham Stouffville Hospital](#)) point to the untapped potential for midwifery leadership to contribute to system transformation and excellence in clinical care. Across the health system there is an expectation that individuals who take on these roles will have formal graduate training at the master's level. Our proposed program will provide ideal preparation for such roles.

The McMaster Midwifery Education Program has currently been engaged by the London Health Sciences Centre (London, ON) to provide mentorship and training to the Midwifery Department as part of their effort to build midwifery leadership in their hospital. This speaks to the recognized need identified by hospital administrators to develop midwifery leadership and to the respect for McMaster Midwifery as an academic unit best positioned to assist this development (see letter of support).

3. Research:

Canadian midwives and midwifery organizations have identified that midwifery-led research is essential in providing high quality care.¹¹ The McMaster Midwifery Research Centre (MMRC) is the first and only midwifery research centre in the country. Since its inception in 2018, MMRC Scientists have provided mentorship to 15 graduate students and an additional 5 practicing midwives who are interested in conducting midwifery research. There are also currently 16 adjunct members who are engaged in research activities with the centre. The MMRC's most recent research symposium was attended by 288 participants, including: midwives, midwifery students, medical students, undergraduate and graduate students, midwifery association staff, researchers, academics, educators, nurses, government representatives, patient advocates, and librarians, hailing from 99 cities from coast to coast to coast across Canada, as well as international attendees from as far as Argentina and Norway. The high level of engagement with the MMRC is a positive indicator of the appetite within the midwifery profession for additional opportunities to engage in research.

In summary, there is a need for midwives with scholarly and leadership skill across a range of roles. Within Canada, midwives with master's level preparation currently hold leadership positions such as faculty members in undergraduate education programs, directors and managers of professional organizations, directors of along-side midwifery units and birthing centres, head midwives, clinical leads, and researchers. A Canadian master's of midwifery degree would more thoroughly prepare midwives for these roles and would help to create new opportunities for midwives in Canada to assume roles that are seen frequently in other countries (such as hospital program managers and professional clinician educators).

¹⁰ International Confederation of Midwives (2018). ICM Strategy 2017 - 2020. Retrieved from: <https://www.internationalmidwives.org/assets/files/general-files/2018/04/final-copy-icm-strategy-2017-20-online.pdf>

¹¹ Murray-Davis, B., Hutton, E., Carty, E., Kaufman, K., & Butler, M., (Eds). Comprehensive Midwifery: The role of the midwife in health care practice, education, and research. The e-Book Foundry @ McMaster University: Hamilton; 2018. Available from: <https://ecampusontario.pressbooks.pub/cmroleofmidwifery/>

II. EVIDENCE OF STUDENT DEMAND

In the fall of 2020, the McMaster Midwifery Education Program invited registered and Indigenous midwives across Canada to participate in an online survey through email newsletters distributed by the Association of Ontario Midwives and the Canadian Association of Midwives. The purpose of the survey was to determine the level of interest in a master's degree program in midwifery and to seek midwives' input in shaping McMaster's continuing education and graduate education offerings for midwives.

We received responses from 154 midwives. We estimate the current number of midwives in Canada to be roughly 2000, which give our responses an 8% margin of error with a 95% confidence interval.

Demographics - Of the respondents, 86% were from Ontario, 7% BC, 4% Alberta and the rest from other provinces and territories (see Appendix X). Most respondents had trained in direct-entry undergraduate programs (65%), while others entered the profession through pre-registration program for midwives practicing prior to midwifery regulation (e.g., Michener Program in Ontario), assessment or bridging programs for internationally trained midwives (e.g., Ryerson's IMPP, UBC's IEMBP), or Indigenous midwifery education programs.

Two thirds (66%) of respondents were in the first ten years of their career. Of respondents who described their current work arrangements (n=123), two-thirds (67.5%) reported working in full-time clinical practice, and less than 3% were in full-time non-clinical leadership roles. 16% of respondents had a master's degree, and 1% had a PhD. Further, 5.5% were currently in a master's degree and 2.5% were enrolled in a PhD.

Interest in graduate studies - There was a high level of interest in future graduate studies: 6 in 10 midwives (59%) reported that they might consider enrolling in graduate studies in the future and 4 in 10 (39%) reported planning to enrol in graduate studies within the next 5 years. Respondents agreed that a Canadian master's degree in midwifery would be beneficial to the midwifery profession (81% agreed or strongly agreed) and an even greater number (83%) expressed a preference for a Canadian master's program over an international program.

Format of master's degree – Preferences regarding the format and structure of graduate studies are strongly aligned with our proposal. There was very strong agreement that the program should be provided in a way that allows for midwives to continue their clinical practice (96%) (see Table 3). Midwives do not want to move to complete the program (91%), though there is support for short in-person courses (86%), or some opportunities for in-person learning (77%). There were very high levels of support for both part-time (96%) and full-time (91%) options. Respondents agree that the program should be available online (94%), and customizable to their interests (91%), with 79% agreeing that asynchronous online courses would allow desired flexibility for midwives. There were similar levels of preference for thesis-based (44%) and course-based (56%) options.

Content of master's degree - Different topics of learning were presented to determine areas of interest. Clinical teaching, leadership, research and advanced clinical skills were all met with strong interest.

Midwives agreed most strongly with the statement “I am interested in gaining skills that will enhance the contributions that I make to the health system” (94% agreed or strongly agreed). Midwives also expressed a strong desire to integrate new clinical skills into their practice (88%).

Overall, the survey responses indicate that there is a keen appetite among midwives in Canada for academic learning and further education. Midwives are motivated to enhance their clinical, leadership and research skills and 17 % of our respondents had graduate level education. The profession is skewed towards those within the earlier part of their careers, suggesting strong potential for future desire for career growth. Canadian midwives want a midwifery master’s program that is offered within Canada, and that affords the option of continuing clinical practice in their home communities while completing it. Given that half of Canadian registered midwives reside in Ontario, many midwives are already familiar with McMaster University, and the university is perfectly poised to lead this innovative new program.

III. JUSTIFIABLE DUPLICATION

The proposed degree is the first of its kind in Canada and will not duplicate other existing degrees. The clinical placements for this degree will not overlap with the clinical placements of undergraduate midwifery students. We do not anticipate any impact on other programs at McMaster or at other institutions.

1.7 DEGREE NOMENCLATURE

The proposed degree is a Master’s of Science in Midwifery. The specific degree level is relevant for the proposed program because it targets midwives, who will typically have completed a baccalaureate degree in midwifery to enter the profession and who will bring to the degree a shared body of knowledge relevant to midwifery practice. The content of the degree will be of a more specialized nature than an undergraduate degree in midwifery, addressing topics that extend beyond the core competencies of midwifery and supporting graduates to bring a systematic and scholarly approach to the application of specialized midwifery knowledge. As described above in section 1.5, the program will meet or exceed the degree level expectations for a Master’s degree. Midwifery is a unique regulated health profession in Canada, and both the target audience and the content of this degree support the proposed name of M.Sc. (Midwifery).

2 ADMISSION & ENROLMENT

2.1 ADMISSION REQUIREMENTS

Admission requirements will include:

1. a four-year undergraduate degree* in midwifery or the international equivalent from an accredited university,
2. a B+ average (minimum 77%, equivalent to a McMaster 8.5 grade point average) in the final two years of undergraduate study, and
3. a minimum of two years of full-time (or equivalent) clinical experience as a practicing midwife.

* Indigenous midwives in Canada who have completed an Indigenous midwifery education program but who have not completed a university degree are eligible to apply for admission through the Facilitated Indigenous Admission Process (See Section 2.3).

As part of the application package, applicants will submit a written personal statement which will describe how their personal experience has prepared them for this degree and will identify their specific area of interest. Applicants will also be required to provide both personal and academic references, which will be used to assist in appraising whether the applicant may be reasonably expected to achieve the learning outcomes upon program completion. Applicants to the thesis stream will be required to submit an academic writing sample.

Applicants whose native language is not English will be required to demonstrate proficiency in the use of the English language, as outlined in the Graduate Calendar. A minimum acceptable TOEFL (iBT) score will be 92 overall with a minimum of 22 for reading 24 for speaking, 24 for listening and 22 for writing. Alternately an overall minimum IELTS score of 7.0 will be required.

Applicants wishing to take clinical elective courses while in the program must be eligible to practice midwifery in Canada.

Meeting the above minimum admissions requirements will not guarantee admission. Limited space will be available, and the admission process is expected to be competitive. Admission to the thesis stream of the program will be limited and students enrolled in the thesis stream will be required to enrol as full-time students.

Applicants will be expected to have taken an undergraduate course in critical appraisal of research (this is a standard component of the curricula of undergraduate midwifery education programs in Canada). Applicants who do not meet this criterion will be required to complete a non-credit course on this subject during the first term of enrollment.

2.2 ENROLMENT PLANNING AND ALLOCATIONS

Academic Year	Cohort Year 1	Cohort Year 2	Cohort Year 3	Total Enrolment	Maturity
2022-23	8 F/T (5 thesis) 16 P/T			8 F/T (5 thesis) 16 P/T	
2023-24	9 F/T (5 thesis) 18 P/T	8 F/T (5 thesis) 16 P/T		17 F/T (10 thesis) 34 P/T	
2024-25	10 F/T (6 thesis) 20 P/T	9 F/T (5 thesis) 18 P/T	- 16 P/T	19 F/T (11 thesis) 54 P/T	
2025-26	10 F/T (7 thesis) 20 P/T	10 F/T (6 thesis) 20 P/T	- 18 P/T	20 F/T (13 thesis) 58 P/T	
2026-27	10 F/T (8 thesis) 20 P/T	10 F/T (7 thesis) 20 P/T	- 20 P/T	20 F/T (15 thesis) 60 P/T	20 F/T 60 P/T

2.3 ALTERNATIVE REQUIREMENTS

All applicants to the program will be required to submit transcripts, clinical and academic references, and a written personal statement.

The program will incorporate facilitated admissions processes for Indigenous and Black applicants to support an inclusive community and to reduce barriers to admission. The process will be similar to the undergraduate Midwifery Education Program's Facilitated Indigenous Application Process (FIAP) and Facilitated Black Admissions Process (FBAP). Applicants will have the option to self-identify in their application. This will prompt a personal one-to-one interview with an Indigenous or racialized faculty member to connect with the applicant to assess suitability to the program and support community building. Applicants will submit standard admission requirements. The applications of individuals who opt into the FIAP or FBAP processes will be reviewed by Indigenous or Black assessors, respectively. Offers of admission will be based on top ranking candidates based on supplementary documentation, GPA, and interview scores.

3 STRUCTURE

3.1 ADMINISTRATIVE, GOVERNANCE AND COMMUNICATION

Like all graduate programs in the Faculty of Health Sciences (FHS), the MSc in Midwifery will have a director. The director will:

- Be selected from faculty affiliated with the undergraduate Midwifery Education Program or the McMaster Midwifery Research Centre (who are typically, but not exclusively appointed in the Department of Obstetrics). The Director will have a dual reporting role to the Associate Dean of Graduate Studies (FHS) and to the Chair of the Department of Obstetrics.
- Ensure admission requirements and academic regulations are appropriately applied
- Work in conjunction with the program's admissions and advisory committees; the Assistant Dean, Midwifery; Chair of the Department of Obstetrics; the deans; and governing bodies of the university
- Take overall responsibility for activities related to the delivery of the program such as instructional support, recruitment, and evaluation
- Develop an annual report for the Department of Obstetrics and FHS

The program will have four standing committees: advisory, curriculum, admissions, and student affairs committees. Each committee will have clearly defined terms of reference to deal with specific issues of the program. Changes to the program (e.g., course changes) will initially be developed and approved by the curriculum committee. Subsequent approvals will follow the normal university order of procedure (e.g., Health Sciences Graduate Policy and Curriculum Council, the Faculty Executive Council, and Graduate Council, as appropriate).

A Program Coordinator will be hired to oversee the administration of the program and will function as the primary administrative contact for admissions, calendar changes, degree audits, in addition to the coordination and support of other administrative activities. Part-time administrative assistance will also be hired to support coordination of student placements. Students completing leadership placements or

clinical placements will be overseen by a faculty supervisor who will assign the final grade informed by the placement preceptor's recommendations.

3.2 STRUCTURE AND REGULATION

The program includes five required courses, worth a total of 12 units, and either a) 6 units of electives plus a thesis, or b) 12 units of electives plus a capstone portfolio (see Table below). All courses are at the graduate level. These expectations meet or exceed university requirement in terms of the minimum number of courses, level of courses, and required elements. Each program learning outcome is addressed in at least one required course as well as in the capstone portfolio or thesis (shown in full detail in the Curriculum Map table in Section 5.2).

Required Courses	
MIDWIF 700: <i>Midwifery Leadership: Residency 1</i> (1.5 units)	
MIDWIF 701: <i>Leadership in the Midwifery Profession</i> (3 units)	
MIDWIF 702: <i>Social Justice and Inclusive Leadership</i> (3 units)	
MIDWIF 703: <i>Foundations of Research for Midwifery Leadership</i> (3 units)	
MIDWIF 704: <i>Midwifery Leadership: Residency 2</i> (1.5 units)	
SGS 101 / Academic Research Integrity and Ethics	
SGS 201/ Accessibility for Ontarians with Disabilities Act - (AODA) Training	
Indigenous Health Online Modules	
[Critical Appraisal of Research Modules for students without this pre-requisite]	
Course-based Stream	Thesis Stream
Electives (12 units) May include: MIDWIF 705 – <i>Independent Study</i> (3 units) MIDWIF 706 – <i>Leadership Placement</i> (3 units) MIDWIF 711 – <i>Point of Care Ultrasound in Maternity Care</i> (1.5 units) MIDWIF 712 – <i>Surgical Assistant in Obstetrics: C-Section</i> (1.5 units) MIDWIF 713 – <i>Management of neonatal hyperbilirubinemia</i> (1.5 units) MIDWIF 714 – <i>Well-infant Care</i> (1.5 units) MIDWIF 715 – <i>Contraception Care</i> (1 unit) MIDWIF 716 – <i>Medication Abortion</i> (0.5 units) MIDWIF 717 – <i>Management of Early Pregnancy Loss</i> (0.5 units) MIDWIF 718 – <i>Gynecological Care in Midlife</i> (1.5 units) MIDWIF 719 – <i>Trauma-Informed Care</i> (3 units) MIDWIF 720 – <i>Community Centred Care</i> (3 units) MIDWIF 721 – <i>Mental Health, Substance Use, and Concurrent Disorders</i> (3 units) MIDWIF 722 – <i>Diabetes in Pregnancy</i> (1.5 units)	Electives (6 units) Will include: 3-unit research methods course (unless exempt based on previous course work) E.g., HRM 721, NUR 715, NUR 745, etc. May include: MIDWIF 705 – <i>Independent Study</i> (3 units) MIDWIF 706 – <i>Leadership Placement</i> (3 units) Electives selected from courses offered by other McMaster graduate programs in the Faculty of Health Sciences (see letters of support).

MIDWIF 723 – <i>Mental Health in Pregnancy and Postpartum</i> (3 units) MIDWIF 730 – <i>Advanced Midwifery Clinical Practicum 1</i> (3 units) MIDWIF 731 – <i>Advanced Midwifery Clinical Practicum 2</i> (3 units) Electives selected from courses offered by other McMaster graduate programs in the Faculty of Health Sciences (see letters of support).	
Consolidation	Consolidation
MIDWIF 707: <i>Capstone portfolio</i>	MIDWIF 708: <i>Thesis</i>

Progression through the program

All incoming students will complete the first required residency course (MIDWIF 700) in the summer of their first year. This initial course will provide an opportunity for students to become oriented to the program, be introduced to the foundations of the curriculum, and get to know their peers and faculty members. The first term will also provide time for students to complete mandatory School of Graduate Studies Courses (SGS 101 / Academic Research Integrity and Ethics and SGS 201 / Accessibility for Ontarians with Disabilities Act - (AODA) Training, online Indigenous Health Modules, and, if necessary, Critical Appraisal of Research Modules.

Full-time sequence - In the fall of the first year, full-time students will complete two core courses (MIDWIF 701 and 702). In the winter term they will complete a third required course (MIDWIF 703) plus one elective. This will prepare students in the thesis stream to defend their thesis proposal in the summer term immediately following their first year. Students will also complete the second residency (MIDWIF 704) and one elective during the summer term at the beginning of their second year. Thesis students will then complete their thesis over the fall and winter terms, while course-based students will complete two additional electives and the capstone portfolio during this time.

Part-time sequence – Part-time students will typically spread the degree requirements out over three years such that they complete only one course per term, and will be required to be enrolled for a minimum of nine terms. For part-time students, all required courses other than the second residency will be completed by the fall of the second year, laying the basis for the core content to inform the student’s consolidation work in their capstone portfolio. Part-time students will complete their second residency (MIDWIF 704) in the summer term at the beginning of their final year.

Students who fail MIDWIF 701 in the fall term will be permitted to enroll in MIDWIF 703 in the winter term in order to avoid delays in progression through the program; however, they will be required to repeat and successfully complete MIDWIF 701 before they can complete MIDWIF 704.

Course descriptions

MIDWIF 700: Midwifery Leadership: Residency 1 - This course will provide students with an in-depth overview of the program and courses, including an introduction to the program faculty, the over-arching objectives of the program, and the structure and content of the courses. An orientation to library resources and online learning tools will be provided. Key concepts pertaining to advanced practice and leadership will be introduced, with a focus on leading self. Students will reflect upon their goals for the program and will set personal learning objectives. Sessions will be led by both faculty and invited guest speakers. This is a face-to-face course offered in an intensive summer course. Students will have the opportunity to engage with faculty and other students in both formal and social settings. (Five days, In

person, Mandatory; 1.5 units)

Prerequisites: Enrollment in the program

MIDWIF 701: Leadership in the Midwifery Profession - This course will provide address 4 key areas related to leadership: leading self, leading people, leading system transformation, and achieving results. Leading self will include a structured approach to identifying personal strengths and goal setting to develop leadership skills. Leading people will include fundamental management and communication skills (e.g., topics such as promoting equity, diversity, and inclusion; coaching; motivation; negotiation; conflict resolution; high-stake conversations; situational awareness; and developing coalitions). Leading system transformation will include an introduction to health systems and key organizations (e.g., hospitals, professional bodies, etc.), systems thinking, innovation and creating a vision, change management, and LEAN methodology. Achieving results will include key leadership skills & tools related to project management. (One term, Asynchronous Online, Required; 3 units)

Prerequisites: MIDWIF 700

MIDWIF 702: Social Justice and Inclusive Leadership - This course will address key concepts pertaining to social justice theory and provide a foundation for inclusive leadership. Theoretical concepts will include intersectionality, elements of critical theory (e.g., critical race theory, gender theory, queer theory, feminist theory, etc.), and traits of inclusive leadership. The course will also address the application of these skills in a health care leadership context through client and community engagement, needs assessment, and participatory action research. (One term, Asynchronous Online, Required; 3 units)

Prerequisites: MIDWIF 700

MIDWIF 703: Foundations of Research for Midwifery Leadership - This course will introduce theory and methods of research relevant to midwifery leaders. Theoretical concepts will include scientific paradigms and ways of knowing, hierarchies of evidence, and theoretical frameworks of relevance to midwifery. Methodological topics will include program logic models, outcome metrics, and evaluation methods. The major project for the course will involve developing an evaluation plan for a quality improvement project or developing a research proposal in the form of a grant application. (One term, Asynchronous Online, Required; 3 units)

Prerequisites: MIDWIF 700, MIDWIF 701

MIDWIF 704: Midwifery Leadership: Residency 2 - Students will complete this course after completion of all core course work, and prior to completion of their thesis or personal project. The course will provide an opportunity to consolidate key concepts related to advanced practice. Students reflect on their personal learning objectives for the degree and will set new leadership objectives for themselves. Sessions will be led by both faculty and invited guest speakers. Students will also present their progress to date on their thesis work or personal project in seminar format. This is a face-to-face course offered in an intensive summer course. Students will have the opportunity to engage with faculty and other students (including the first-year cohort) in both formal and social settings. (Five days, Synchronous online, Mandatory; 1.5 units)

Prerequisites: MIDWIF 700, MIDWIF 701, MIDWIF 702, MIDWIF 703

MIDWIF 705: Independent Study - This course is designed to allow the student to tailor his/her learning to specific topics in midwifery or health care relevant to his/her midwifery and research interests and to do advanced work in this area. The topic studied may be related to but will not overlap with the student's thesis topic. Under the guidance of a faculty member, the student will examine critically the pertinent literature. (One term, Elective; 3 units)

Prerequisites: MIDWIF 700, MIDWIF 701

MIDWIF 706: Leadership Placement - The placement will involve 96 hours of time in a midwifery-related organization (e.g., hospital or health care organization, professional association, regulatory body, government ministry, non-profit organization, etc.) and will be completed over one term (e.g., one 8-hour day per week for twelve weeks). The placement will be supervised by a person in a leadership position and the learning objectives will focus on the development of leadership skills. (One term, In person, Elective; 3 units)

Prerequisites: MIDWIF 700, MIDWIF 701, MIDWIF 702, MIDWIF 703

MIDWIF 707: Capstone portfolio – The capstone portfolio will include the final assignments from each of the core courses, a leadership vision statement, and a final report on a personal project that has been conducted based on one or more of the final assignments from the core courses (e.g., a quality improvement project conducted in the student’s work setting).

Prerequisites: MIDWIF 700, MIDWIF 701, MIDWIF 702, MIDWIF 703, MIDWIF 704, + 12 additional units

MIDWIF 708: Thesis – The thesis will demonstrate integrative thinking and a strong understanding of the relevant literature. It will involve conducting and reporting original research that focuses on a midwifery topic that is selected by the student in consultation with their thesis Supervisor. The student will submit a formal written thesis proposal to their supervisory committee that outlines their plan prior to commencing research. The thesis proposal will normally be approved within twelve months of entry into the program for full-time students and within 18 months of entry for part-time students.

Prerequisites: MIDWIF 700, MIDWIF 701, MIDWIF 702, MIDWIF 703, MIDWIF 704, + 6 additional units

MIDWIF 711: Point of Care Ultrasound in Maternity Care – This elective course provides training in a Canadian context for entry-level skills for point of care ultrasound for primary maternity care. The course covers the anatomy and physiology of the normal gravid pelvis and will emphasize the sonographic technique, normal appearance, and ethical and professional responsibilities. Students will complete a final synthesis assignment that addresses an issue related to the integration of point of care ultrasound in clinical practice. (One term, online asynchronous modules and in-person workshop, Elective; 1.5 units)

MIDWIF 712: Surgical Assistant in Obstetrics: C-Section – This elective course provides training in a Canadian context for entry-level skills for the surgical assistant with a focus on obstetrics. The course covers understanding of OR processes and roles, relevant anatomy, instrument identification and use, operative procedures, complications, and pharmacology. Students will complete a final synthesis assignment that addresses an issue related to the integration of surgical assistance in clinical practice. (One term, online asynchronous modules and in-person workshop, Elective; 1.5 units)

MIDWIF 713: Management of neonatal hyperbilirubinemia – This elective course provides in-depth training for midwives providing care to newborn requiring phototherapy for the treatment of physiological jaundice. Topics will include physiology, identification, management, and treatment of hyperbilirubinemia. Students will complete a final synthesis assignment that addresses an issue related to the integration of the management of hyperbilirubinemia into midwifery practice. (One term, online asynchronous modules and in-person workshop, Elective; 1.5 units)

MIDWIF 714: Well-infant Care – This elective course provides training to support the provision of primary well infant care until 18 months of age. The course will focus on normal infant development and includes topics such as routine vaccinations, infant feeding and transition to solids, infant physical exams, normal developmental milestones, use of Rourke baby record for documentation, and the integration of well-infant care into midwifery practice. (One term, online asynchronous modules, Elective; 1.5 units)

MIDWIF 715: Contraception Care - This elective course provides essential skills and foundational information related to counselling for contraception, reproductive physiology, screening and treatment of sexually transmitted infections, and hormonal and non-hormonal methods of contraception including intrauterine contraceptive devices, medication abortion and sterilization. The course was designed by Midwives and Obstetricians to provide interprofessional perspectives. (One term, online asynchronous modules, Elective; 1 units)

MIDWIF 716: Medication Abortion – This elective course provides foundational information and essential skills related to the provision of care for the management of medication abortions. Topics include counseling, pharmacology, considerations for care, visit requirements, follow-up care, and the integration of medication abortion into midwifery practice. (One term, online asynchronous modules, Elective; 0.5 units)

MIDWIF 717: Management of Early Pregnancy Loss – This elective course provides foundational information and essential skills related to the provision of care for the management of early pregnancy loss. Topics include counseling, pharmacology, expectant, medication and surgical management options, considerations for care, follow up care, and service delivery models for early pregnancy loss care. (One term, online asynchronous modules, Elective; 0.5 units)

MIDWIF 718: Gynecological care in midlife – This elective course introduces foundational information in providing gynecological care during midlife. Topics include menopause counseling, pessary fitting, endometrial biopsy, and psychosocial dimensions of gynecological care. (One term, online asynchronous modules, Elective; 1.5 units)

MIDWIF 719: Trauma and violence-informed care – This elective course will examine the theoretical and research-based foundations of the concept of trauma and violence-informed care and will explore issues related to the integration of this approach in the provision of sexual and reproductive health care. (One term, online asynchronous modules, Elective; 3 units)

MIDWIF 720: Community-centred care – This elective course will examine the theoretical and research-based foundations of community-centred care. The course will build skills in community consultation and engagement. Students will acquire knowledge that will support them to develop health care programs and services that are responsive to community needs. (One term, online asynchronous modules, Elective; 3 units)

MIDWIF 721: Mental health, substance use, and concurrent disorders – This elective course will cover fundamental clinical and psychosocial knowledge about common mental health conditions, substance use, and concurrent disorders. The course will focus on building skills to support the provision of strengths-based care to individuals with mental health concerns, currently or with a history of substance use and/or other concurrent disorders within the context of sexual and reproductive health care. (One term, online asynchronous modules, Elective; 3 units)

MIDWIF 722: Diabetes in pregnancy – This elective course will provide midwives with foundational knowledge and skills for providing care to individuals experiencing diabetes in pregnancy within the context of interprofessional care teams. Topics include pathophysiology; pharmacological management of diabetes in pregnancy, labour, and the postpartum; dietary and exercise counselling; pregnancy testing and follow-up; and considerations for fetal and newborn health. (One term, online asynchronous modules, Elective; 1.5 units)

MIDWIF 723: Mental health in pregnancy and postpartum – This elective course provides midwives with foundational knowledge and skills to provide support to individuals with mental health concerns in pregnancy and the postpartum. Topics will include evidence-based approaches to the screening and management of anxiety and depression, brief interventions within the scope of primary care, facilitation of peer support groups, and services delivery models for the prevention and treatment of perinatal mental health concerns. (One term, online asynchronous modules, Elective; 3 units)

MIDWIF 730: Advanced Midwifery Clinical Practicum I - This placement will involve 96 hours of time in a clinical setting (e.g., one 8-hour day per week for twelve weeks, eight 12-hour days over two weeks, twelve 8-hour days over three weeks, etc.) and will be completed within one term. Placements will be customized to each student's program of study. (One term, In person, Elective; 3 units)

Prerequisites: MIDWIF 700, MIDWIF 701, and at least 6-units of clinical courses (e.g., MIDWIF 711, MIDWIF 712, MIDWIF 713, etc.)

MIDWIF 731: Advanced Midwifery Clinical Practicum 2 – This second clinical placement will involve 96 hours of time in a clinical setting (e.g., one 8-hour day per week for twelve weeks, eight 12-hour days over two weeks, twelve 8-hour days over three weeks, etc.) and will be completed within one term. Placements will be customized to each student's program of study. (One term, In person, Elective; 3 units)

Co/prerequisite: MIDWIF 730

3.3 GRADUATE PROGRAMS - PROGRAM LENGTH

McMaster SGS regulations require full-time master's degrees to be completed within three years and part-time master's degrees to be completed within five years. We are proposing that full-time students will complete the degree in six terms (two years) which allows additional time to still meet the three-year limit should delays be encountered. The part-time option will allow students to complete the degree in as few as three years (or maximum of five years as per SGS regulations), which will permit part-time students to have an average course load of one course per term, which should be manageable for students who wish to continue to work while completing the degree.

4 CURRICULUM AND TEACHING

4.1 PROGRAM CONTENT

The program content will be unique across Canada as the only graduate level degree in midwifery. Faculty who will teach in the program are leaders in their field and will be expected to remain current on emerging knowledge that is relevant to the area of study. The program will also draw on the participation of midwifery leaders who are external to the university through guest lectures, which will expose students to diverse perspectives and ensure a dynamic, high caliber learning experience. The program curriculum includes a focus on social justice to support equity, diversity, and inclusion, and will intentionally create an inclusive program culture. The curriculum will focus primarily on the Canadian context, but will incorporate global perspectives on issues as well, and will allow International students enrolled in the program to explore topics from a perspective that is relevant to their context.

4.2 PROGRAM INNOVATION

The program we propose will be the first of its kind in the country and unique internationally in its combined focus on leadership, social justice, and research within the context of midwifery. The degree will address a pressing need within the midwifery profession to develop leadership and research capacity, both in Canada and around the globe. McMaster University houses Canada's first and only midwifery research centre which will provide a unique and rich learning environment for trainees. The program will offer professional midwives an interdisciplinary curriculum that will foster leadership skills and support graduates to themselves be innovators who lead system transformation and ongoing quality improvement in health services. Program delivery will take advantage of asynchronous online formats that will support flexibility for adult learners and help ensure accessibility of the program to a diverse student body.

4.3 MODE(S) OF DELIVERY

The program will be delivered in an online learning format, complemented by one in-person residency period. This is similar to other robust master's programs at McMaster University, such as the master's of science in health science education. The two residency sessions (one in-person and one on-line) will be mandatory and will offer the benefit of face-to-face interaction and discussion with faculty, guest speakers and student colleagues. (See the descriptions for MIDWIF 700 and MIDWIF 704 for more information).

McMaster's course management system, Avenue to Learn (A2L), will be utilized as the learning management system for the program. A2L supports a number of pedagogical e-learning strategies, such as asynchronous discussion groups, pre-recorded lectures and student presentations, and the provision of written course materials. A2L has the flexibility to establish separate small discussion groups within a course shell, which is important given the intent for most of the courses to be conducted in a small group learning format.

To supplement A2L, the program will utilize videoconferencing platforms (e.g., Zoom or Teams) as a virtual learning environments (VLE) that will allow for synchronous discussion and live guest speakers (whose presentations can also be recorded for those unable to attend). The VLE can also function as a work environment for student collaboration and brainstorming.

This mode of delivering the program is intended to increase accessibility for midwives in clinical practice who might otherwise be unable to engage in post-graduate studies while working. In addition, the format will support the participation of midwives across Canada and in other countries. It is anticipated that the placement portions of the degree (which are electives) would be undertaken in the area of the student's residence, thus minimizing the need for travel during the program.

All midwifery faculty members at McMaster are well-versed in online education, as it is an integrated part of the undergraduate midwifery education program. All courses will be guided by underlying principles of accessibility in providing and presenting course materials (e.g., closed captioning of audio, availability of recordings, inclusion of an accessibility and accommodation statement in course syllabi).

4.4 EXPERIENTIAL LEARNING

The program will provide opportunities for experiential learning in two ways, which are each described in further detail below:

- 1) All students will have an option to complete a 3-unit leadership placement.
- 2) Students who take at least 6 units of elective courses that have a clinical focus will have the option to complete 3 to 6 units of clinical placement.

MIDWIF 706 – Midwifery Leadership Placement. This is an elective course worth three units. The placement will involve 96 hours of time in a midwifery-related organization (e.g., hospital or health care organization, professional association, regulatory body, government ministry, non-profit organization, etc.) and will be completed over one term (e.g., one 8-hour day per week for twelve weeks). The placement will be supervised by a person in a leadership position and the learning objectives will focus on the development of leadership skills. Placements will be customized to each student's program of study (i.e., will map on to their area of focus and their personal learning objectives). Placements will be arranged by the program but may be identified by the student. Pre-requisites: MIDWIF 700, MIDWIF 701, MIDWIF 702, MIDWIF 703.

MIDWIF 730 – Advanced Midwifery Clinical Practicum I. This is an elective course worth three units. The placement will involve 96 hours of time in a clinical setting (e.g., one 8-hour day per week for twelve weeks, eight 12-hour days over two weeks, twelve 8-hour days over three weeks, etc.) and will be completed within one term. Placements will be customized to each student's program of study (i.e., will map on to the didactic clinical content they have studied and to their personal learning objectives). Placements will be arranged by the program but may be identified by the student. Pre-requisites: MIDWIF 700, MIDWIF 701, and at least 3-units of clinical courses (e.g., MIDWIF 711, MIDWIF 712, MIDWIF 713, etc.).

MIDWIF 731 – Advanced Midwifery Clinical Practicum II. This is a second elective clinical placement course worth three units. The placement will involve 96 hours of time in a clinical setting (e.g., one 8-hour day per week for twelve weeks, eight 12-hour days over two weeks, twelve 8-hour days over three weeks, etc.) and will be completed within one term. Placements will be customized to each student's program of study (i.e., will map on to the didactic clinical content they have studied and to their personal learning objectives). Placements will be arranged by the program but may be identified by the student. Pre/co-requisite: MIDWIF 730.

Supply of placement opportunities. The McMaster Midwifery Education Program has a broad network of clinical placement sites that it uses for undergraduate midwifery students. We do not anticipate that the placements for master's level students will conflict with undergraduate student placements, as the placements will be for different purposes, but do anticipate that our established networks will facilitate us identifying placements. We have attached letters of support for both clinical placement opportunities and leadership placement opportunities (See Appendix A).

Accommodation. Placement courses are elective rather than required courses, so an inability to complete a placement will not preclude successful completion of the degree. Placements will be sought and evaluated based upon individual student learning objectives which will support individualized accommodation of student needs.

4.5 ACCESSIBILITY & INCLUSION

The proposed program prioritizes inclusion and accessibility in multiple ways:

Admissions – The program will offer facilitated admissions processes for Indigenous and Black applicants to reduce barriers to participation (described in more detail in Section 2.3) and to support compositional diversity in the student body.

Structure – The program will be offered in a primarily on-line format to allow the participation of individuals who live across the country and abroad. The ability to access the program in an on-line format will support people who might not be able to leave their home community for financial or social reasons to participate in graduate education that might not otherwise be available to them. The use of primarily asynchronous on-line formats will increase the flexibility for students to allocate their time in ways that can accommodate their needs and will require less bandwidth than virtual classroom delivery modes, ensuring access for those in settings where internet infrastructure is less reliable.

Curriculum – The program has a core course, Social Justice and Inclusive Leadership, that incorporates key theoretical content to build capacity in students to actively contribute to building a more inclusive society. The learning activities and assessments in the course will focus on the practical application of theory to lead change within health care to improve equity and inclusion. The work of Indigenous and racialized scholars will be infused in course content and the curriculum will provide experiences for students to explore multiple epistemologies and ways of knowing.

Inclusive teaching principles – In alignment with McMaster’s commitment to inclusive teaching, the program will apply the five principles outlined in McMaster’s Guide to Inclusive Teaching. Specific examples of this are:

- the program will have a BPOC (Black/Person of Colour) Advisor who will support students throughout the program,
- Indigenous students will have access to the BPOC Advisor as well to McMaster’s Indigenous Student Services and the Faculty of Health Sciences’ Indigenous Students Health Sciences Office and the new Indigenous Learning Lodge that the faculty is implementing,
- recognition that even with a flexible on-line structure, students might experience challenges such as technical issues and isolation, and incorporating multiple, varied and proactive ways to reach out and support students
- the program will set clear expectations for academic work while making room for the unexpected, e.g., our approach will build in grace days for deadlines,
- the program will ensure compositional diversity in the faculty members which will include faculty and instructors who identify as Indigenous or racialized, and
- the program will incorporate educational best practices for accessibility and will leverage the expertise within the MacPherson Institute as the curriculum is developed to ensure that universal design strategies inform content, delivery, assessments strategies, and use of technology.

Compliance with AODA - The proposed program will aim to maintain the highest standard of accessibility for its students and staff by complying with the objectives set-out by the *Accessibility for Ontarians with Disabilities Act (AODA)* and the *McMaster University Accessibility Plan 2011-2025*. Program staff and faculty involved in the provision of educational and non-educational services to members of the public will complete mandatory training provided by McMaster University regarding accessibility policies and practices.

4.6 RESEARCH REQUIREMENTS (IF APPLICABLE)

Students in the thesis stream of the program will complete a thesis which embodies the results of original research and mature scholarship, in accordance with the regulations of McMaster’s School of Graduate Studies.

5 ASSESSMENT OF LEARNING

5.1 METHODS FOR ASSESSING STUDENTS

The diverse selection of core and elective courses, the leadership and clinical placements, and the thesis and capstone project options afford multiple means of assessing students in the program to ensure that they achieve the defined learning outcomes and meet expectations at the level of a master’s degree. Performance in each of the curriculum elements will be assessed using a variety of course assessment tools, as well as work-place based assessments for those students doing practicum placements.

Objects of assessment in the mandatory and elective courses will include academic papers, oral presentations that will be submitted as videos, and asynchronous written dialogue discussions. Some of the clinical electives will also incorporate written quizzes and exams. There will be clearly delineated criteria and rubrics to indicate the required level of academic rigour for each type of course assignment. Students will be assessed on their ability to critically analyse and translate current knowledge and apply it to systems within midwifery. The topics for written and oral assignments within the core courses will align with the program learning outcomes. In the table below, examples are provided of the kinds of assignments that will be used to assess program learning outcomes that are very particular to the program (i.e., PLOs 2, 3, 4, and 6).

PROGRAM LEARNING OUTCOMES (PLOs)	Example of learning activities/assignments
PLO 2 - Apply theoretical knowledge to plan, implement, and lead change within health care settings to transform systems and achieve results	Develop a proposal for an evidence-based quality improvement initiative in a clinical setting.
PLO 3 - Apply concepts of social justice as a leader and to promote equitable sexual and reproductive health care that meets community needs	Develop a protocol for a community needs assessment. Develop a proposal for a health service innovation aimed at improving access to equitable sexual and reproductive health care.
PLO 4 - Advocate for and lead expansion of the role and contributions of midwives in health systems	Develop a proposal for a new midwifery service model or role.
PLO 6 - Apply knowledge to evaluate initiatives in a health care setting or conduct original research to advance scholarship within the field of midwifery	Develop an evaluation protocol for a quality improvement initiative or a service innovation.

In the thesis stream, both the thesis and thesis defense will be conducted in accordance with university requirements. The capstone portfolio will compile student progress and accomplishment throughout the program and will include an individual project, which will provide an opportunity for the student to demonstrate their ability to comprehend, synthesize, and apply concepts learned throughout the program.

5.2 CURRICULUM MAP

PROGRAM LEARNING OUTCOMES (PLOs)	PROGRAM REQUIREMENTS		
By the end of the program the student graduating with a Masters of Midwifery degree will be able to	Master's Degree Level Expectations (DLEs)	Teaching Activities & Learning Opportunities	Assessments and Evidence
	<i>For each PLO, identify which DLE(s) it aligns with below.</i>	<i>For each PLO, what teaching activities and learning opportunities are students exposed to that will help them to achieve that PLO?</i>	<i>For each PLO, what is specifically collected from the student as evidence that they can/have achieved the PLO before they graduate?</i>
1. Critically evaluate research methods and the validity of key assumptions and evidence	1. Depth and Breadth of Knowledge 2. Research and Scholarship 3. Application of Knowledge 5. Awareness of Limits of Knowledge	Foundations of Research for Midwifery Leadership Social Justice and Inclusive Leadership Thesis	<ul style="list-style-type: none"> • Academic papers • Asynchronous written dialogue submissions • Oral presentations (submitted as videos) • Thesis • Thesis defense
2. Apply theoretical knowledge to plan, implement, and lead change within health care settings to transform systems and achieve results	1. Depth and Breadth of Knowledge 2. Research and Scholarship 3. Application of Knowledge 6. Autonomy and Professional Capacity	Residency 1 Leadership in the Midwifery Profession Social Justice and Inclusive Leadership Leadership Placement Capstone Portfolio Thesis	<ul style="list-style-type: none"> • Academic papers • Asynchronous written dialogue submissions • Oral presentations (submitted as videos) • Thesis • Thesis defense • Capstone Portfolio
3. Apply concepts of social justice as a leader and to promote equitable sexual and reproductive health care that meets community needs	1. Depth and Breadth of Knowledge 2. Research and Scholarship 3. Application of Knowledge 6. Autonomy and Professional Capacity	Social Justice and Inclusive Leadership Leadership Placement Capstone Portfolio Thesis	<ul style="list-style-type: none"> • Academic papers • Asynchronous written dialogue submissions • Oral presentations (submitted as videos) • Thesis • Thesis defense • Capstone Portfolio
4. Advocate for and lead expansion of the role and contributions of midwives in health systems	3. Application of Knowledge 4. Communication Skills 6. Autonomy and Professional Capacity	Residency 1 Leadership in the Midwifery Profession Social Justice and Inclusive Leadership Leadership Placement Residency 2 Capstone Portfolio	<ul style="list-style-type: none"> • Academic papers • Asynchronous written dialogue submissions • Oral presentations (submitted as videos) • Thesis • Thesis defense • Capstone Portfolio • Clinical Evaluations

		Thesis	
5. Communicate effectively as a leader using both written and oral communication strategies	4. Communication Skills 6. Autonomy and Professional Capacity	Residency 1 Leadership in the Midwifery Profession Social Justice and Inclusive Leadership Foundations of Research for Midwifery Leadership Leadership Placement Residency 2 Capstone Portfolio Thesis	<ul style="list-style-type: none"> • Academic papers • Asynchronous written dialogue submissions • Oral presentations (submitted as videos) • Thesis • Thesis defense • Capstone Portfolio
6. Apply knowledge to evaluate initiatives in a health care setting or conduct original research to advance scholarship within the field of midwifery	1. Depth and Breadth of Knowledge 2. Research and Scholarship 3. Application of Knowledge 5. Awareness of Limits of Knowledge 6. Autonomy and Professional Capacity	Foundations of Research for Midwifery Leadership Capstone Portfolio Thesis	<ul style="list-style-type: none"> • Academic papers • Thesis • Thesis defense • Capstone Portfolio
7. Demonstrate critical analysis and expertise in a focused area of midwifery leadership (e.g., advanced practice, professional leadership, midwifery education, midwifery research)	1. Depth and Breadth of Knowledge 2. Research and Scholarship 3. Application of Knowledge 4. Communication Skills 5. Awareness of Limits of Knowledge 6. Autonomy and Professional Capacity	Independent study Electives Capstone Portfolio Thesis	<ul style="list-style-type: none"> • Academic papers • Thesis • Thesis defense • Capstone Portfolio

5.3 DEMONSTRATING STUDENT ACHIEVEMENT

The vision of this program is to enhance the growth of midwifery leadership within health systems through building both knowledge and skills in professional leadership. Graduates will also acquire expertise in a chosen area of focus which may include clinical leadership, midwifery education, research, or advanced clinical practice. The successful graduate of this unique master’s degree will be someone who can lead change and promote innovation in midwifery, wherever they may work. The leadership and clinical placements will provide an opportunity for students to demonstrate the successful application of theory in practice. Providing the opportunities for placements during the program will afford assessment of the student’s abilities in an authentic setting; it will also set the stage for the development of networks that students will use as they strive to move into positions of leadership upon graduation. In the final year of study, the thesis or individual project will provide an opportunity for students to bring together the content they have learned throughout the program and demonstrate successful application and synthesis. The capstone portfolio will provide a further opportunity for students in the course-based stream to produce a summative document to demonstrate achievement of all the program learning expectations.

6 RESOURCES

6.1 GRADUATE PROGRAMS

6.1.1 ADMINISTRATIVE, PHYSICAL AND FINANCIAL RESOURCES

Administrative Resources. We will require a Program Director (who is a faculty member) in a 0.2 FTE role. This role, along with a full time Administrative Assistant and a casual Program Support Assistant, will comprise the core staff of the Program. An Administrative Assistant at 1.0 FTE will provide dedicated administrative support for the Program and will work with faculty and students to plan and coordinate Program courses, events and activities. The casual Program Support Assistant at 0.35 FTE will provide ad hoc support to the Program. The Program will be led by the Program Director, who together with the support staff will oversee daily operations and ensure adherence to the aims and objectives and business plan. The program will be funded through tuition revenue.

Physical Resources. The program will be delivered primarily through online methods, which will limit the use of physical resources. The two residencies will be offered during the summer term, when the undergraduate midwifery program does not offer any in-person courses, so the in-person sessions for the residencies can be held in the classroom used by the Midwifery Education Program. We propose using existing space within the offices occupied by the Midwifery Education Program. This will include office space (for a total 151 square feet (or 14 square meters)) for the Program Director, the program manager, and one administrative assistant.

Financial Resources. The Program will be self-funded. Tuition income from domestic and international full-time and part-time students will be the sole source of revenue to the Program. Most of our expenses are related to human resources, which includes salary expenses for the Program Director, staff and teaching faculty. Central expenses are the next major driver for Program costs, which are determined centrally by the University given Program operational needs. Other Program direct expenses are minimal which includes costs for Program supplies, teaching equipment, telephone and travel.

6.1.2 LIBRARY, TECHNOLOGY, AND LABORATORY RESOURCES

The McMaster Health Sciences Library has an excellent collection of midwifery resources that currently supports the undergraduate midwifery education program. The demands of the proposed master's program would be minimal and, as confirmed through consultation with the head librarian, would not require additional staffing or acquisitions for the library. Existing library online resources would be leveraged to provide students with training in library skills. The program will be run using existing technology platforms at the university (e.g., Avenue to Learn, Zoom, Teams). The program will not use any laboratory resources.

6.1.3 FACULTY

The core faculty members either teach in McMaster's undergraduate midwifery program (n=7) or are members of the MMRC. Several of the core faculty members have growing research programs and experience supervising graduate students. Across the undergraduate midwifery faculty members and adjunct MMRC members we have nine people with doctoral level training who would be able to supervise students. This includes an Indigenous scholar, Dr. Karen Lawford, who will be available to supervise Indigenous midwives enrolled in the degree. Experienced supervisors will support the development of

supervisory skills in faculty members with less experience. Core faculty members will contribute to course development and will teach in the program. We will also bring in adjunct faculty members to support course development and teaching. Teaching and facilitating within each course will be team based, which will distribute the teaching load. Our budget includes resources to increase the use of sessional instructors in the undergraduate midwifery education program to shift faculty members' workloads to allow them to teach in the master's program.

6.1.4 STUDENT FINANCIAL SUPPORT

Financial support for students will come from multiple sources, including OSAP, university entrance scholarships, teaching assistantships in the undergraduate midwifery education program, research assistantships funded by faculty research grants, and external scholarships (e.g., CIHR, OGS). The MMRC has also been highly successful in obtaining graduate student research grants through the Association of Ontario Midwives. Additionally, the MMRC has a research fund which is available to support grants and scholarships. International students from the global south will be eligible for scholarships through Rotary International and through the Aga Khan Foundation.

6.1.5 FACULTY RESEARCH FUNDING

The Table shows the amount of funding that has been awarded to core faculty members who will be teaching in the program and indicates the funds available to support faculty research and potentially available to support students' work, either through the provision of stipends or materials for the conduct of the research.

Operating Research Funding by Source and Year				
	Source			
Year ¹	Granting Councils ²	Other Peer Adjudicated ³	Contracts⁴	Others ⁵
2020	\$1,095,342	\$34,000		
2019	\$249,368	\$228,313		\$145,249
2018		\$165,367		\$215,000
2017		\$49,473	\$150,000	\$240,000
2016	\$949,510			
2015		\$150,000		
2014	\$946,604			
Totals	\$3,240,824	\$627,153	\$150,000	\$600,249

1. *Years are shown as calendar years, according to the year the funds were initially awarded*

2. *Source: CIHR*

3. *Sources include: Association of Ontario Midwives Research Grants, MITACS, The Teresa Cascioli Charitable Foundation, Grand Challenges Canada*

4. *Sources include: The Ontario Ministry of Health via Markham Stouffville Hospital*

5. University allocated grants (Sources include: Sunnybrook Research Institute, The McMaster Midwifery Research Fund, the Department of Obstetrics & Gynecology)

6.1.6 SUPERVISION

Faculty Name & Category of Appointment	Home Unit ¹	Level of Privileges ²
Category 1		
Dr. Liz Darling	Obstetrics	Supervisor
Dr. Beth Murray-Davis	Obstetrics	Supervisor
Dr. Patricia McNiven	Family Medicine	Supervisor
Dr. Anne Malott	Family Medicine	Supervisor
Kate Demers	Obstetrics	Committee Member
Kathi Wilson	Obstetrics	Committee Member
Helen McDonald	Family Medicine	Committee Member
Category 2		
Dr. Karen Lawford	McMaster Midwifery Research Centre (MMRC)	Supervisor
Category 3		
Dr. Meredith Vanstone	Family Medicine	Supervisor
Dr. Stacey Ritz	Pathology and Molecular Medicine	Co-Supervisor
Category 4		
Dr. Cristina Mattison - Adjunct	Obstetrics/HEI	Supervisor
Category 6		
Dr. Elizabeth Cates	MMRC	Committee Member
Carol Cameron - Adjunct	Family Medicine	Committee Member
Abigail Corbin - Adjunct	Family Medicine	Committee Member
'Remi Ejiwumni - Adjunct	Family Medicine	Committee Member

^{1.} This is the budget unit paying the salary: department, school, research centre or institute, or other.

^{2.} Indicate the level of supervisory privileges held by each faculty member: e.g., full, master's only, co-supervision only, etc.

Category 1: tenured or tenure-track core faculty members whose graduate involvement is exclusively in the graduate program under review. For this purpose the master's and doctoral streams of a program are considered as a single program. Membership in the graduate program, not the home unit, is the defining issue.

Category 2: non-tenure-track core faculty members whose graduate involvement is exclusively in the graduate program under review.

Category 3: tenured or tenure-track core faculty members who are involved in teaching and/or supervision in other graduate program(s) in addition to being a core member of the graduate program under review.

Category 4: non-tenure track core faculty members who are involved in teaching and/or supervision in other graduate program(s) in addition to being a core member of the graduate program under review.

Category 5: other core faculty: this category may include emeritus professors with supervisory privileges and persons appointed from government laboratories or industry as adjunct professors. Please explain who would fall into this category at your institution.

Category 6: non-core faculty who participate in the teaching of graduate courses.

Note: Academic units can opt to include additional columns with demographic information about their faculty members, as appropriate.

Completed and Current Numbers of Thesis ¹ Supervisions by Faculty Member						
Member	Completed			Current		
	Master's	PhD	PDF	Master's	PhD	PDF
Dr. Beth Murray-Davis – Associate	4	-	-	1	-	-
Dr. Patricia McNiven – Associate	13	1	-	-	-	-
Dr. Anne Malott – Associate	1	-	-	-	-	-
Dr. Liz Darling – Associate	1	-	-	3	2	2

7 QUALITY AND OTHER INDICATORS

7.1 ACADEMIC QUALITY OF THE PROGRAM

The program leadership and faculty members will draw on the experience we have developed from offering an undergraduate midwifery education program to implement a comprehensive approach to measure and ensuring the academic quality of the program. We will use the following methods of formative assessment and feedback to facilitate reflexivity within the Program and to support ongoing refinement of the curriculum and its delivery:

- Program-wide student-faculty meetings each term to receive feedback and address questions
- Informal requests for student feedback during courses
- Anonymous student evaluations of courses and instructors at the end of courses
- In-program student satisfaction and experience surveys
- Alumni satisfaction and experience surveys
- Written and verbal feedback from instructors and preceptors teaching in the program

We will also make use of additional metrics to document the academic quality of the program:

- Number of scholarly presentations per student
- Number of scholarly publications per student
- Proportion of thesis students with at least one accepted thesis-related publication within one year of graduation
- Average time-to-completion for full-time students
- Average time-to-completion for part-time students

- Number of awards, grants, and scholarships (internal and external)
- Retention rate
- Employment in a leadership position within 24 months of graduation
- Number of full-time students receiving TA-ships and RA-ships

7.2 INTELLECTUAL QUALITY OF THE STUDENT EXPERIENCE

Faculty in the program have experience creating high quality experiences for midwives who are graduate students through work that has been done since the inception of the McMaster Midwifery Research Centre (MMRC). The MMRC offers a rich learning environment for graduate students, with opportunities for students to interact with faculty and research staff in research centre meetings and in smaller project team meetings. The centre also offers several research-focussed workshops each year to support the development of research skills. Informal mentorship from research staff and other students is readily available, and an online repository of resources supports students to develop key research skills such as completion of research ethics review board applications and the development of detailed research protocols. The MMRC also runs an annual research symposium and regular research rounds, which offer opportunities to showcase student research and for students to be exposed to high calibre research done by leading researchers in the field. Current areas of research strength at the MMRC will facilitate opportunities for students to participate in ongoing research projects whose goal coincides with those of the master's program – the development of new midwifery leadership capacity and broader access to midwifery care. Regular one-on-one meetings between students and their faculty supervisor will help support student success and maintain student engagement with the program.

Current faculty members who are available to provide mentorship and academic supervision have extensive experience in midwifery practice, research, and administration. The program will also recruit guest lecturers from diverse backgrounds to support compositional diversity and the inclusion of diverse perspectives and experience in the delivery of the curriculum.

The program will offer opportunities for customization to meet the unique needs of students. Elective courses will also students to focus on content that is of greatest relevance to their context and goals. Leadership and clinical placements will also allow students to pursue individual learning objectives, as will the option of an independent study elective.

TRACKING THE APPROVALS PROCESS FOR NEW GRADUATE PROGRAMS

PLEASE NOTE: This table must be appended to the New Program Proposal Document and updated as each step in the approvals process is completed.

STEP IN THE NEW PROGRAM APPROVALS PROCESS	NAME OF COMMITTEE/ INDIVIDUAL PROVIDING CONSULTATION	DATE OF DOCUMENT APPROVAL
Preparation of the Resource Implications & Financial Viability Template (Budget)	Linda Coslovi, Associate Vice-President, Finance & Planning (Academic)	March 1, 2021
University Students Fees Committee Approval of Budget	Fees Committee	March 5, 2021
Departmental & Faculty Approvals of Proposal	Graduate Policy and Curriculum Council	February 17, 2021
	Faculty of Health Sciences Executive Committee	March 24, 2021

Please note that approvals from the following internal committees is also required before the New Program Proposal can be sent to Quality Council & MTCU: *Graduate Council, University Planning Committee and Senate.*

Appendix A
Letters of Support
Master's of Science (Midwifery) Proposal

Faculty of Health Sciences:

Nursing
Health Research Methodology
Health Science Education
Public Health
Rehabilitation Sciences

Midwifery Organizations:

Canadian Association of Midwives
Canadian Midwifery Regulator's Council
Association of Ontario Midwives
College of Midwives of Ontario

Other:

Dr. Jon Barrett – Incoming Chair of Department of Obstetrics & Gynecology
Dr. Laura Gaudet
MATCH
Oracle Community Care and Outreach
Crown Point
NorWest Community Health Centre
Stephanie Crouch, RM
Ottawa Birth and Wellness Centre
Halton Healthcare
Collingwood General & Marine Hospital
London Health Sciences Centre

January 25, 2021

Dr. Liz Darling
Assistant Dean, Midwifery
HSC-4H24
McMaster University

Dear Liz,

As the Assistant Dean of Graduate Nursing Programs, it is my pleasure to offer you a letter of support for your proposed Master of Midwifery Program.

As we have discussed, the School of Nursing offers several graduate level courses that may be of interest to your students, including: NUR 715 (Quantitative Research Methods), NUR 712 (Evidence Based Health Care), NUR 745 (Qualitative Research Methods), NUR 770 (Mixed Methods), and NUR 700 (Philosophy). In addition to this, there are several cross listed courses RS/NUR 725 (Knowledge Translation) and RS/NUR 758 (Qualitative Data Analysis) which may be of interest to students. We would welcome students in the Masters of Midwifery degree to enroll in these courses with the understanding that your program may need to provide teaching support should we be unable to accommodate them with our existing resources. We also welcome the offer for students in our programs to potentially take electives offered by your program.

Yours sincerely,



Nancy Carter, RN, PhD
Assistant Dean, Associate Professor
Graduate Nursing Program, School of Nursing
Faculty of Health Sciences



**Department of Health Research Methods, Evidence and Impact
Faculty of Health Sciences**

1280 Main St West, Building #43, Room 207
Hamilton, ON, L8S 4K1

January 22, 2021

Dr. Liz Darling
Assistant Dean, Midwifery
HSC-4H24
McMaster University

Dear Liz,

On behalf of the Health Research Methodology Program, I am happy to provide this letter of support for your proposed Master of Midwifery Program.

Subject to availability, students in your program will be able to take HRM courses as electives providing that they meet the prerequisites and have permission of the instructor. We also welcome the offer for students in our program to potentially take electives offered by your program.

Yours sincerely,

A handwritten signature in black ink that reads "Mitchell Levine".

Mitchell Levine, MD, MSc, FRCPC, FACP, FISPE
Assistant Dean
Health Research Methodology Program
Faculty of Health Sciences

January 15, 2021

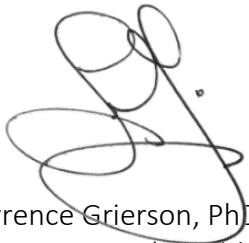
Dr. Liz Darling
Assistant Dean, Midwifery
HSC-4H24
McMaster University

Dear Liz,

On behalf of the Health Science Education Program, I am happy to offer you a letter of support for your proposed Master of Midwifery Program.

The HSED program offers courses that your students may be interested in taking as electives, and our program is happy to welcome students in the Master of Midwifery Program to enroll in these courses; subject to availability. As you and I have discussed, we may need to ask that your faculty members provide teaching support if limited resources would otherwise prevent us from enrolling Master of Midwifery students in HSED courses. We also welcome the offer for students in our programs to potentially take electives offered by your program.

Yours sincerely,



Lawrence Grierson, PhD
Assistant Dean | Health Sciences Education Graduate Program
Scientist | McMaster FHS Program in Education Research, Innovation & Theory (MERIT)
Associate Professor | Department of Family Medicine

January 18, 2021

Dr. Liz Darling
Assistant Dean, Midwifery
HSC-4H24
McMaster University

Dear Liz,

As the Director of McMaster's Master of Public Health (MPH) Program, I offer this this letter to indicate my support for your proposed Master of Midwifery Program.

Your proposed program will create opportunities for students in both the Public Health and the Midwifery programs to occasionally take elective courses in the other program, and we welcome this opportunity.

Yours sincerely,

Emma Apatu

Dr. Emma Apatu, DrPH, MPH
Director, Master of Public Health program
Associate Professor
Department of Health Research Methods Evidence and Impact
McMaster University
Email: apatue@mcmaster.ca

Dr. Liz Darling Assistant Dean,
Midwifery McMaster University

January 19, 2021

Dear Liz,

The Canadian Association of Midwives (CAM) is the national organization representing midwives and the profession of midwifery in Canada. The mission of CAM is to provide leadership and advocacy for midwifery throughout Canada as an autonomous body. Your proposal to provide a master's degree in midwifery will address a long overdue need in Canada and is a welcome addition to support the development of the profession nationally and internationally.

Around the world midwives are grossly underrepresented within positions of leadership. In Canada there is no Chief Midwifery Officer, there are no midwives in cabinet or legislature, no midwives holding leadership positions with Global Affairs or the Public Health Agency. Like our colleagues in nursing and other female dominated health professions, midwives who occupy leadership positions are unlikely to have any formal leadership training. Indeed, there are no graduate level midwifery programs available in Canada, and unlike our colleagues in medicine and nursing there are no funds or fellowships to develop midwifery leadership in Canada.

The International Confederation of Midwives has recently highlighted the need to develop midwifery leadership as a key strategic priority. The proposed curriculum offers an excellent approach to meet this need by developing midwives' knowledge and skills so that they can take on leadership roles across health systems. The interdisciplinary approach of integrating current scholarship pertaining to health care leadership and social justice within health care and how these bodies of knowledge can be applied within the midwifery profession is timely. The integration of social justice content reflects the deep need within our society to address issues of social inequity and to work towards ensuring health equity. Experiential learning opportunities like the leadership placement elective provided through the program will support students to be well prepared to apply what they learn in the work environment.

We are happy to offer CAM's strong support for the development of this program and we welcome students enrolled in this program to participate in leadership placements within our organization.

Sincerely,



Alix Bacon, RM

President / Présidente

Canadian Association of Midwives / Association Canadienne des sages-femmes

February 4, 2021


Dr. Liz Darling
Assistant Dean, Midwifery
HSC-4H24
McMaster University

Dear Liz,

As the Vice-Dean, School of Rehabilitation Science, I am happy to provide you with a letter of support for your proposed Master of Midwifery Program.

The School of Rehabilitation Science welcomes the opportunity to collaborate with Midwifery to enhance each other's course offerings. We appreciate your offer for students in our programs to potentially take electives offered by your program. We have several online courses that may be of interest to your students, including REHAB 744 (Quantitative Research Methods), HM 732 (Strategic Writing), and HM 734 (Quality and Safety in Healthcare). We would welcome students in the master's of midwifery degree to enroll in these courses, with the understanding that your program may need to provide teaching support should we be unable to accommodate them with our existing resources.

Yours sincerely,



Dr. Dina Brooks, PhD, MSc, BSc (PT)
Vice-Dean (Faculty of Health Sciences) and
Executive Director, School of Rehabilitation Science
McMaster University



Canadian Midwifery Regulators Council | Conseil canadien
des ordres de sages-femmes

Canadian Midwifery Regulators Council
21 St. Clair Avenue East, suite 303
Toronto, ON M4T 1L9

January 21, 2021

Dr. Liz Darling,
Assistant Dean, Midwifery
McMaster University

Dear Dr. Darling,

The Canadian Midwifery Regulators Council (CMRC) is a network of provincial and territorial regulatory authorities. Collectively, we regulate the profession of midwifery, setting and maintaining high standards of practice, and ensuring regulatory harmony across the country. I am writing this letter to express our organization's support for McMaster University's proposal to develop a master's degree in midwifery and our willingness to explore leadership placements for students enrolled in the program.

Our organization strives to provide strong leadership and excellence in midwifery regulation, education and practice. To achieve this, we need midwife professionals who not only have advanced skills in the clinical domain, but also leadership and research skills. A Canadian master's of midwifery degree would more thoroughly prepare midwives in these areas and would help to create new opportunities for midwives in Canada to assume roles that they frequently assume in other countries (such as hospital program managers and professional clinician educators).

We strongly believe that McMaster Midwifery is well positioned to offer the country's first master's degree in midwifery. We look forward to working with the program in this innovative and much needed initiative.

Sincerely,

Louise Aerts, CMRC Board Chair



January 20, 2021

Dr. Liz Darling
Assistant Dean, Midwifery
McMaster University

Letter of Support

Dear Liz Darling,

On behalf of the Association of Ontario Midwives (AOM), I am pleased to offer this letter of support for the proposed Master's of Science degree in Midwifery at McMaster University.

The Association of Ontario Midwives is dedicated to advancing the clinical and professional practice of Indigenous/Aboriginal and registered midwives in Ontario. Ontario midwives have a 25-year history of making important contributions to Ontarians by providing care that supports excellent clinical outcomes and high levels of client satisfaction. The proposed Master's program in Midwifery aligns with our vision of midwives leading reproductive, pregnancy, birth & newborn care across Ontario and proactively addresses a pressing societal need in Canada for midwives to play an increased role in leadership within health systems. We strongly believe this program will support for high quality and responsive services provided by midwives which meet the needs of the population.

The AOM fully supports the implementation of this Master's program. We are also happy to offer leadership placement opportunities in our organization to students in the program. We look forward to this collaboration.

On behalf of the AOM, yours sincerely,

Juana Berinstein
A/Executive Director
Association of Ontario Midwives



Dr. Elizabeth Darling
Assistant Dean, Midwifery
McMaster University
Email: darlinek@mcmaster.ca
Tel: (905) 525-9140 ext. 21597

RE: Master of Science in Midwifery

January 19, 2021

Dear Dr. Darling,

On behalf of the College of Midwives of Ontario, I am writing to express my full support for the proposed Master of Science degree in Midwifery at McMaster University. The College of Midwives is the regulator of midwives in the province of Ontario. We regulate more than 1000 midwives in Ontario and our purpose is to protect the public and the public interest.

One of our guiding principles includes innovation. We are pleased to see that the Master of Science degree curriculum will offer opportunities for midwives who are taking on innovative roles to ensure that they have excellent training and consolidation of advanced skills to support doing so safely. Additionally, the program's focus on preparing midwives to lead health system innovation and ensuring ongoing quality improvement will support emerging midwifery leaders to ensure safe, high quality care for the public. We are also pleased to see that the curriculum addresses social justice and community engagement, which will support graduates to lead changes in the health system that support more equitable health care.

I truly believe that this program is a unique and valuable addition to the graduate level educational options available midwives. The College will also be happy to take on students for leadership placement opportunities within our organization.

Best regards,

Kelly Dobbin
Registrar-CEO
College of Midwives of Ontario
Tel: 416-640-2252 ext 226

Jon F. R. Barrett

Professor University of Toronto

Chief of Maternal Fetal Medicine, Sunnybrook Health Science Centre
Aubrey and Marla Dan Program 2075 Bayview Ave, M4 – 172 Toronto

M4N 3M5

Tel : 416 480 4920

Fax :416 480 4933

February 3, 2021

Dr. Liz Darling
Assistant Dean, Midwifery
McMaster University

Dear Liz,

As the incoming chair of McMaster's Department of Obstetrics and Gynecology, I am delighted to provide you with a letter of support for your midwifery master's degree proposal. My vision for the department is to strengthen our research focus, and to do so I hope to be able to build on the department's existing research strengths which include the McMaster Midwifery Research Centre.

Introducing the first master's degree in midwifery in the country will support McMaster to play a leadership role nationally and internationally in midwifery research. The midwifery master's program will build research capacity and will contribute to McMaster's Obstetrics and Gynecology Department developing a rich program of inter-professional research in sexual and reproductive health.

Yours sincerely,

Jon Barrett





Kingston Health
Sciences Centre

Centre des sciences de
la santé de Kingston

Laura M. Gaudet
MD, MSc, FRCS
Associate Professor
DEPARTMENT OF
OBSTETRICS AND GYNAECOLOGY

Division Head
MATERNAL FETAL MEDICINE
Kingston General Hospital
76 Stuart Street
Kingston, ON, Canada K7L 2V7
Tel 613 548-6072
Fax 613 548-1330
laura.gaudet@kingstonhsc.ca

January 20, 2021

Dear Dr. Darling,

As the co-founder for ORACLE, I am very pleased to provide this letter in support of providing clinical placement opportunities for students in the Midwifery Master's Program at McMaster University. ORACLE is a collaborative care program, with care of medically and socially complex clients shared between the midwifery team and the maternal-fetal medicine team at The Ottawa Hospital. Care is delivered within an outreach model, and work is done collaboratively with many community organizations including outreach nursing, mental health and addiction services, community health centres, and child protection.

Within the ORACLE collaboration, work is quite different from conventional midwifery, but provides exposure to the various layers of healthcare and social needs and complexities that are experienced by some birthing people. The program will offer students the opportunity to participate in caring for people with complex needs, which will dovetail nicely with the core social justice content and the advanced clinical elective content in your master's program curriculum.

The proposed master's program aligns well with the goals of the ORACLE model and has the potential to affect an impact at the person and system level. I believe this project will be a landmark model for advanced education in midwifery.

In 2019, I moved from Ottawa to Kingston, where I continue to see the same patient population. With involvement of local midwives and support of the Queen's Department of Obstetrics and Gynecology, I would be very happy to explore opportunities to provide clinical placements to students enrolled in this program. Please accept this letter as a strong endorsement for this initiative.

Respectfully submitted,

Yours truly,

A handwritten signature in cursive script that reads "L. Gaudet".

Laura Gaudet, MSc, MD, FRCS

Maternal Fetal Medicine Specialist, Kingston Health Sciences Centre
Associate Professor, Obstetrics and Gynaecology, Queen's University

January 19, 2021

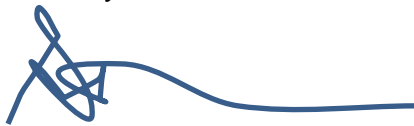
Dear Liz,

The MATCH (Midwifery and Toronto Community Health) program offers a wide variety of services related to pregnancy, labour, and birth, as well as postpartum care for infants and adults, well-gynecological care and abortion services. Our team is made up of four midwives and a social worker. We work closely with an interdisciplinary team to provide a wide array of services including supports and services for individuals and families planning to welcome a baby. We are writing this letter to express our unequivocal support for the development of a master's degree in midwifery that will prepare midwives with advanced skills, much needed in the profession today.

We know that having midwives with advanced skills and integrating them into expanded clinical roles leads to excellent clinical outcomes, high levels of satisfaction for clients, improved access to care for underserved population and more appropriate care for populations who are marginalized. Our team specializes in caring for people who for a variety of reasons have experienced discrimination and limitations in accessing healthcare services appropriate to their needs. We are hopeful that the master's program that you are proposing will provide opportunities for midwives to acquire the education and skills that help them to better serve underserved populations and to push to improve health care more broadly.

We look forward to working with McMaster Midwifery as you move forward in offering Canada's first master's degree in midwifery. We are happy to provide clinical placement opportunities at MATCH to master's students enrolled in this Program.

Sincerely,



Shezeen Suleman RM
Midwife Co-Lead

ORACLE COLLABORATIVE CARE AND OUTREACH

2260 Walkley Road, unit #101 Ottawa Ontario K1G 6A8 t. (613)883-2566 f. (613)319-2565

Dear Dr. Darling,


As the co-founder for ORACLE, I am very pleased to provide this letter in support of providing clinical placement opportunities for students in the Midwifery Master's Program at McMaster University. ORACLE is a collaborative care program, with care of medically and socially complex clients shared between the midwifery team and the maternal-fetal medicine team at The Ottawa Hospital. We deliver care within an outreach model, and work collaboratively with many community organizations including outreach nursing, mental health and addiction services, community health centres, and child protection.

Our work is quite different from conventional midwifery, but provides exposure to the various layers of healthcare and social needs and complexities that are experienced by some birthing people. Our program will offer students the opportunity to participate in caring for people with complex needs, which will dovetail nicely with the core social justice content and the advanced clinical elective content in your master's program curriculum.

We are excited that the program will be graduating midwives with advanced clinical training in medically complex and marginalized clients.

The proposed master's program aligns well with our goals and has the potential to demonstrate an impact at the person and system level. I believe this project will be a landmark model for advanced education in midwifery and would be very happy to provide clinical placement opportunities to students enrolled in this program. Please accept this letter as a strong endorsement for this initiative.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'AMG', with a long, sweeping horizontal line extending to the right.

Amy McGee RM MSW PhD

Crown Point

Family Health Centre

67 KENILWORTH AVE N, LOWER LEVEL
HAMILTON, ONTARIO L8H 4R6
TELEPHONE (905) 547-2302
FASCIMILE (905) 548-9722

DR. HAIDER SAEED
DR. MEGHAN DAVIS
DR. CHRISTINE ZRINCAK
DR. EMILY OW

January 19th, 2021

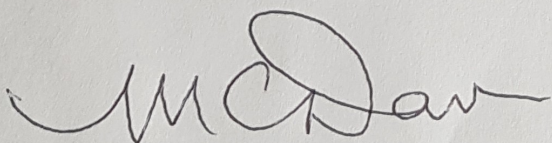
Dear Dr. Darling,

The Crown Point Family Health Centre is a patient centred family medicine team working together to build a healthier community in central Hamilton. Our centre strives to provide access to quality healthcare, and to support patient self-management through a caring, collaborative organization. We have a long history of collaboration with McMaster University, and since 2018 with the McMaster Midwifery Education Program. Our health team includes a well-integrated midwifery team that offers expanded midwifery services to our community. All our midwives hold adjunct or faculty appointments at McMaster University. I am writing this letter today to express our support for accommodating the students enrolled in the Midwifery Master's program for clinical placements at our centre.

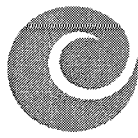
The midwifery scope of practice across Canada has expanded over time to include advanced skills (e.g., surgical assist, point of care ultrasound, intrauterine contraceptive device insertion, etc.) that are additional to the core competencies of the profession and not part of the skill set of all midwives. The Midwifery Master's Program will provide opportunities for education and training to help fill this gap. Furthermore, experiential education provided through this Program, in the form of a clinical or a leadership placement provides an excellent opportunity for students to apply knowledge and consolidate skills.

Our Centre is committed to providing clinical placement opportunities to students enrolled in this Program. We strongly support further development of this Program and look forward to its successful implementation.

Sincerely,



Meghan Davis B. Eng. MD FCFP
Associate Lead Physician, Hamilton Family Health Team
Assistant Clinical Professor, Department of Family Medicine, McMaster University



NorWest Community
Health Centres
Centres de santé
communautaire NorWest

NorWest CHCs
525 Simpson St
Thunder Bay, ON
P7C3J6

Dear Dr. Darling,

In our role as midwives at the NorWest Community Health Centres, we strongly endorse the launch of the first Canadian Master's degree in Midwifery. NorWest Community Health Centres understands that every client, family, pregnancy and baby is unique, that requires personalized care. We believe the Master's degree in Midwifery can help establish expertise and autonomy for midwives in practice that allow them lead innovation in our health system to create better patient-centred care.

Midwives are front line health care workers who are trusted in our community and have the unique opportunity to spend more time with our clients. We need more midwives with advanced skills training, in an enhanced capacity, to meet the challenges faced by our community. The proposed Master's degree in Midwifery paves the way for providing innovative and specialized care to midwifery clients by thoroughly preparing midwives through quality education and hands-on training in clinical and leadership domains.

We encourage the development of the Master's degree in Midwifery. We strongly believe this will enhance the roles of midwives in our community specifically, and across the province. We look forward to the possibility of having midwives enrolled in this Master's program participate in clinical placements with us. We sincerely hope that this Program receives the required funding and approval to move forward.

Yours sincerely,

Jenni Huntly

Jenni Huntly RM

Rebecca Hautala RM

Thunder Bay (Main Office) 525 Simpson Street Thunder Bay, ON P7C 3J6 Tele: 807.622.8235	Longlac 99 rue Skinner Ave C.P./P.O. Box 910 Tele: 807.876.2271	Armstrong P.O. Box 104 Armstrong, ON P0T 1A0 Tele: 807.583.1145	Mobile Units 1-866-357-5454
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Queensway Obstetrics and Gyneacology

89 Queensway West, Suite 406
Mississauga, ON L5B 2V2
Phone: 905-268-9928 Fax: 1-888-972-4226

January 21, 2021

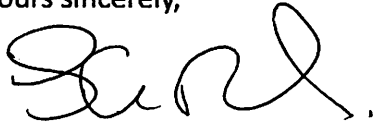
Dr. Liz Darling
Assistant Dean, Midwifery
McMaster University

Dear Liz,

As you know, I am a registered midwife who practices in Mississauga, Ontario. As part of my practice, I provide pessary care in collaboration with an obstetrician-urogynecologist. I am enthusiastic about the proposal that McMaster has developed for a master's degree for midwives and am very willing to contribute towards supporting the program by providing clinical placements to students in the program who are interested in gaining advanced clinical skills to fit vaginal pessaries for the treatment of pelvic organ prolapse.

My experience providing pessary care has shown me that midwives have much to offer in providing holistic, patient-centred sexual and reproductive health care, as well as essential well-woman care. A master's degree that supports midwives to gain advanced clinical skills and also build leadership abilities will help midwives to successfully expand the contributions that they are currently making to health care. I am happy to provide strong endorsement for the proposal.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'SC', with a stylized flourish at the end.

Stephanie Crouch



Ottawa Birth and
Wellness Centre
Centre de naissance et
de bien-être d'Ottawa

Ottawa Birth and Wellness Centre
2260 Walkley Road
Ottawa, ON
K1G 6A8

Dr. Liz Darling
Assistant Dean, Midwifery
McMaster University

January 25, 2021

Dear Liz,

The Ottawa Birth and Wellness Centre (OBWC) is a midwife-led, community-based Independent Healthcare Facility, located just south of downtown Ottawa. We offer birthing people a safe, comfortable, family-centered environment to welcome their baby into the world. Our centre also serves as a community base for information and support about pregnancy, labour and birth, infant feeding, and parenting.

We are very excited to hear about McMaster's proposal for a master's degree in midwifery and about the focus the proposed program will have on cultivating midwifery leaders. As a midwife-led organization, we appreciate the need for educational opportunities for midwives to develop their knowledge and skills to prepare them for leadership positions. As our birthing centre demonstrates, midwifery-led innovations have the potential to make strong, cost-effective and positive contributions to the health system. The proposed degree would support more midwives to take on leadership roles in communities across Ontario and expand the positive impact of midwifery care.

It is my pleasure to offer this letter of support for your proposal. The OBWC would also be happy to offer students enrolled in the midwifery master's program leadership placements at our Centre.

Sincerely,

Elyse Banham

Elyse Banham
Executive Director,
Ottawa Birth and Wellness Centre



Dr Liz Darling

Assistant Dean, Midwifery

McMaster University

19 January 2020

Dear Dr Darling

On behalf of Halton Healthcare, I am pleased to provide a letter of support for your proposal to create a Master's degree program in Midwifery.

As a community hospital corporation in Halton Region, Ontario, we are committed to providing exemplary patient experiences, always. More than 4,000 babies are delivered each year at our hospitals and we recognize the importance of our midwifery colleagues as part of the team providing care to mothers, their babies, and families.

Providing graduate education opportunities to midwives will serve them well in preparing them to take on leadership roles within the midwifery profession, and the broader healthcare system. Hospitals will benefit from midwives acquiring an advanced body of knowledge and skills. Most importantly, we believe that those living in the communities which we serve will be advantaged by the development of this program.

From a personal perspective, I previously trained and practiced in the United Kingdom, where midwives are much more central to maternity care. I think there is tremendous opportunity to advance midwifery in Canada, and establishment of a Master's program could help promote such advancement.

We would like to take this opportunity to thank you for your efforts, and we look forward to our ongoing collaboration.

Yours sincerely

A handwritten signature in black ink, appearing to read "D. Edgcumbe", written over a horizontal line.

Dr Daniel P Edgcumbe

Vice President, Medical Affairs



HALTON HEALTHCARE

3001 Hospital Gate
Oakville, ON L6M0L8



**Healthy Babies,
Happy Families**
The Well Baby Clinic



Dr. Liz Darling
Assistant Dean, Midwifery
McMaster University

Dear Dr. L Darling,

In my role as the clinic lead of Healthy Babies, Happy Families Well-Baby Outpatient Clinic, an expanded midwifery care model at the Collingwood General and Marine Hospital, I am very excited to learn about your proposal to create a master's degree for Canadian midwives. I value my own undergraduate and graduate education from McMaster University, and strongly believe that graduate level studies are important to prepare midwives to take on leadership roles in the health care system.

In collaboration with the Collingwood General and Marine Hospital, midwives have worked with other health professionals in our community to develop a unique, interdisciplinary model of midwifery-led care. This innovative model is designed to address gaps in our local health care system by improving access to care to meet the needs of birthing people and their babies, particularly in the postpartum period. Our program offers postpartum midwifery care to all patients, regardless of their MRP in pregnancy, and helps to ensure appropriate follow-up for newborns with hyperbilirubinemia and supports successful breastfeeding. We have achieved high levels of client satisfaction, as well as strong buy-in from other health professionals.

On behalf of the Healthy Babies, Happy Families Well-Baby Outpatient Clinic, I would be willing to provide placement opportunities to midwives enrolled in your program. In my role as clinic lead, I would be able to provide an experience that would support students to gain leadership skills, in addition to gaining experience working in a different service delivery model.

Midwives have a lot to offer the health care system. I'm strongly supportive of your proposal for a degree that will offer midwives an opportunity to gain skills that will catalyze new opportunities for them to contribute to create innovations to better serve birthing families.

Sincerely,

Natalie Kirby RM, MSc, IBCLC
Clinic Lead, Healthy Babies, Happy Families Well-Baby Outpatient Clinic

INCLUSIVE CARING ACCOUNTABLE RESPECTFUL EXCELLENCE ADAPTABLE TEAMWORK 

459 Hume Street, Collingwood, Ontario L9Y 1W9 (705) 445-2550 www.cgmh.on.ca



@CollingwoodHosp



CollingwoodGMHospital



Collingwood General and Marine Hospital

February 4, 2021

Dr. Liz Darling
Assistant Dean, Midwifery
McMaster University

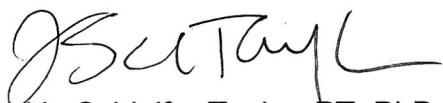
Dear Dr. Darling,

The London Health Sciences Centre (LHSC) is an acute care teaching hospital that serves as the referral centre for southwestern Ontario. LHSC is home to Children's Hospital and was the first Ontario hospital to establish a Department of Midwifery and appoint a Chief of Midwifery. Over the past year, with the support of the Children's Health Foundation, LHSC has established two additional hospital leadership roles within our midwifery department – Academic Lead and Research Lead. Midwives have much to offer our health care system with respect to ensuring high quality care for families, and we are excited about the benefits that our new midwifery leadership model will generate both for our health professionals and for the community we serve. The midwifery leadership model that we have introduced serves as an example to be adopted by other hospitals to enhance the contributions of midwives.

In rolling out our new leadership model, we have greatly appreciated McMaster Midwifery's support in developing the skills of LHSC's new midwifery leaders. I'm delighted to learn that you are proposing a new master's degree for midwives. The curriculum that you are proposing is ideal for nurturing new midwifery leaders who will be able to contribute positively to the health system both in hospitals and other settings.

I am very supportive of your proposal, and we would welcome the opportunity for students in the program to learn from our midwifery leaders through elective placements.

Yours sincerely,



Jackie Schleifer Taylor, PT, PhD, CHE
Interim President and Chief Executive Officer
London Health Sciences Centre

Curricula Vitarum

Elizabeth (Liz) Kathleen Darling

Beth Murray-Davis

Dorothy Anne Margaret Malott

Cristina A. Mattison

Patricia S. McNiven

Kate Demers

Helen McDonald

Ann Kathleen (Kathi) Wilson

Meredith Vanstone

Stacey Ritz

Elizabeth Kathleen Darling

NAME Elizabeth (Liz) Darling
ADDRESS HSC-4H24, 1280 Main St W, Hamilton, ON L8S 4K1
Phone: 905-525-9140 ext. 21597
Fax: 905-523-6459
Email: darlinek@mcmaster.ca

EDUCATIONAL BACKGROUND

Degrees and diplomas

2014 PhD, Population Health, University of Ottawa, Ottawa
2007 MSc, Health Research Methodology, McMaster University, Hamilton
1997 BHSc (Midwifery) *Summa Cum Laude*, McMaster University, Hamilton
1994 BArtsSc (Hon) *Summa Cum Laude*, McMaster University, Hamilton

Qualifications, Licensures and Certifications

Registered Midwife, College of Midwives of Ontario, Ontario, Canada

Other Specialized Training

2016 Canadian Child Health Clinician Scientist Program (CCHCSP) Seminar Series, Children's Hospital of Eastern Ontario Research Institute (CHEO-RI), Ottawa, ON
2015 CHCSP Annual National Symposium Sponsored Rising Researcher (CHEO-RI), Halifax, NS
2010 Population Health Intervention Research Summer Institute, Winnipeg, MB
CIHR/NCCPH Population Health Intervention Research Network
2010 Reproductive and Perinatal Epidemiology Summer Institute, Maryland, USA
CIHR Institute of Human Development, Child and Youth Health, and NIH-NICHD

CURRENT STATUS AT MCMASTER

2018-present Assistant Dean, Midwifery
2017-present Associate Professor, Special, Department of Obstetrics & Gynecology
2017-present Associate Member, Department of Health Research Methods, Evidence and Impact

PROFESSIONAL ORGANIZATIONS

- 2016-present Canadian Association of Health Services and Policy Research
- 2014-present Canadian Association for Midwifery Education
- 2002-present Society of Obstetricians and Gynaecologists of Canada
- 2000-present Canadian Association of Midwives
- 1997-present Association of Ontario Midwives
- 1997-present College of Midwives of Ontario

EMPLOYMENT HISTORY

University appointments

- 2017-present Associate Professor, Department of Obstetrics & Gynecology,
McMaster University, Hamilton, ON
- Associate Member, Department of Health Research Methods, Evidence & Impact,
McMaster University, Hamilton, ON
- Adjunct Scientist, ICES (McMaster)
Hamilton, ON
- 2015-2016 Assistant Professor (part-time), Midwifery Education Program, Laurentian University,
Sudbury, ON
- 2008-2014 Assistant Professor (part-time), Midwifery Education Program, Laurentian University,
Sudbury, ON *N.B. – this was not an independent researcher position, I was
concurrently undertaking a doctoral degree
- 2006-2008 Lecturer (part-time), Midwifery Education Program, Laurentian University,
Sudbury, ON

Academic

- 2005-2006 Sessional Instructor, Midwifery Education Program, Laurentian University, Sudbury, ON
- 2003 Sessional Instructor, Midwifery Education Program, Ryerson University, Toronto, ON
- 2001 Teaching Assistant, Midwifery Education Program, Ryerson University, Toronto, ON
- 1993-1995 Teaching Assistant, Arts & Science Program, McMaster University, Hamilton, ON

Clinical

- 2005-2016 Registered Midwife & Practice Partner, Midwifery Group of Ottawa, Ottawa, ON

1997-2003 Registered Midwife & Practice Partner, Midwifery Care ~ North Don River Valley, Thornhill, ON

Consultations

2004-present Registered Midwife advisor to legal counsel regarding civil litigation (occasional)

2007-2008 Consultant Reviewer, Database Quality Review, Ontario Midwifery Program, Ministry of Health and Long Term Care

2005 Consultant re: national midwifery registration exam, Canadian Midwifery Regulators Consortium

2002-2006 Clinical Auditor, College of Midwives of Ontario

SCHOLARLY AND PROFESSIONAL ACTIVITIES

Grant & Personnel Committees

2017-present Member, CIHR, Health Services Evaluation & Interventions Research peer review committee

2016-present Member, International Confederation of Midwives Research Award peer review committee

2017 Member, Association of Ontario Midwives Mentored & Research Excellence Awards peer review committee

2015-2016 Member, Laurentian Midwifery Education Program Faculty Hiring Committee (chair in 2015)

2015 Chair, Director Hiring Committee, Laurentian Midwifery Education Program

2014 Member, CIHR, Knowledge Synthesis Program peer review committee

2000 Member, Executive Director Hiring Committee, Association of Ontario Midwives

Executive Positions

2013-2016 Board Member, Canadian Association for Midwifery Education

1997-2000 Treasurer & Executive Committee Member, Board of Directors, Association of Ontario Midwives

Journal Referee

2020-present Peer reviewer, Healthcare Policy (2 reviews)

2019-present Peer reviewer, Journal of Obstetrics and Gynaecology of Canada (1 review)

2019-present Peer reviewer, Women and Birth (2 reviews)

- 2018-present Peer reviewer, Midwifery (3 reviews)
- 2018-present Peer reviewer, Journal of Midwifery and Women’s Health (1 review)
- 2016-present Peer reviewer, Birth (~1 review/year)
- 2007-present Peer reviewer, Canadian Journal of Midwifery Research and Practice (1-2 reviews/year)

External Grant Reviews

- 2018 PSI Foundation Research Grant Application Reviewer (1 grant)

Peer Review Committees

- 2018-present Co-chair, Maternal-Child Theme Group, Canadian Association of Health Services and Policy Research
- 2018-present Member, Perinatal Epidemiology Theme Group, Canadian National Perinatal Research Meeting
- 2015-present Member, Association of Ontario Midwives Annual Conference
- 2018 Chair, Nursing and Midwifery Theme Group, Canadian National Perinatal Research Meeting
- 2018 Member, Canadian Association of Midwives Annual Conference
- 2017 Member, Canadian Association of Health Services and Policy Research
- 2017 Member, International Confederation of Midwives Triennial Congress
- 2011 Member, Joint AOM/MANA/ACNM Conference

HONOURS AND AWARDS

- 2019 Association of Ontario Midwives Excellence in Midwifery Research Award
- 2018 Certificate in Academic Leadership, McMaster Faculty of Health Sciences
- 2015 Joseph De Koninck Prize - Doctoral thesis award
- 2014 Dean’s Scholarship, University of Ottawa
- 2014 Significant Contribution Award, Canadian Journal of Midwifery Research & Practice
- 2011 Vanier Canada Graduate Scholarship, CIHR

2011	CIHR Health Professional Fellowship (declined)
2009	Admission Scholarship, University of Ottawa
1993	Gilmour Memorial Prize, McMaster University
1991	Yates Scholarship, McMaster University
1990	Level I Inquiry Prize, McMaster University
1989	George and Nora Elwin Scholarship, McMaster University

COURSES TAUGHT

Undergraduate

Midwifery

2020-present	MIDWIF 1 F03, Introduction to Research Methods, Instructor and Coordinator (1 term/annum)
2018-present	MIDWIF 3I03, Advanced Clinical Skills I – Emergency Skills Workshop, Instructor (1 day)
2017-present	MIDWIF 1D03, Midwifery the Profession, Lecturer (1 Session/annum)
2017	MIDWIF 3L03, Advanced Clinical Skills II – ALARM, Instructor (1 day)
2016	MIDW-3425EL, Interdisciplinary Maternity Care (Laurentian University), Tutor (1 term)
2014-2016	MIDW-3006EL, Advanced Clinical Skills II – Emergency Skills Workshop (Laurentian University), Instructor and Coordinator (2 days/ annum)
2014-2016	MIDW-3056EL, Midwifery Issues (Laurentian University), Instructor and Coordinator (1 term/ annum)
2014-2016	MIDW-4004EL - Maternal and Newborn Pathology (Laurentian University), Tutor (1 term/ annum)
2015	MIDW-1056EL - With Woman (Laurentian University), Co-Instructor (1 term)
2014	MIDW-2004EL - Normal Childbearing (Laurentian University), Tutor (1 term)

Undergraduate Medicine

2017-present	Member, Supervisory committee, Medical student research project (Allison Ouellette, <i>Incidence, Risk factors and Long-Term Outcomes of Neonatal Renal Vein Thrombosis in Ontario: A Population-Based Cohort Study</i>)
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- 2017-2019 Supervisor, Medical student research project (Catherine Friedman, *Resident attitudes towards Caesareans in Canadian Obstetric and Gynaecology Residency Programs*)
- 2017-2018 Teaching Session, Obstetrics Clerkship Rotation (1 session/year)
- 2017 Supervisor, Medical student research elective (2 weeks, Meara Tubman Broer)

Graduate

Health Research Methodology

- 2017 HRM 721, Fundamentals of Health Research and Evaluation Methods, Tutor (1 Session)

Postgraduate

Obstetrics & Gynecology

- 2017-2019 Obstetrics Resident, Research Supervisor (Simon Deluce, *Non-Indicated Transfers of Care from Midwives to Physicians in Ontario*)

Pediatrics

- 2018-present Pediatrics Resident, Member of Research Supervisory Committee (Cal Robinson, *Long-term cardiovascular outcomes in children with Kawasaki disease: A population-based cohort study*)
- 2017-2019 Pediatrics Resident, Member of Research Supervisory Committee (Ranu Malhi, *Neonatal outcomes of people with inadequate prenatal care: A retrospective chart review*)

Other

Faculty Development

- 2018-present Co-facilitator, Community of Practice group, FHS Academic Leadership Program

Additional Teaching Experience

- 2013-present Instructor, SOGC ALARM course
- 2001-present Instructor, Association of Ontario Midwives Emergency Skills Workshop
- 1999-2016 Clinical preceptor, Midwifery Education Program (MEP)
- 2010-2011 Course Coordinator, Normal Childbearing, MEP, Laurentian University
- 2009-2010 Course Coordinator and Tutor, Normal Childbearing, MEP, Laurentian University

2006-2008	Course Coordinator and Tutor, Midwifery Care I, MEP, Laurentian University
2006-2008	Supervisor, Midwifery Final Synthesis Paper, MEP, Laurentian University
2006-2007	Tutor, Midwifery Care IV, MEP, Laurentian University
2005	Tutor, Midwifery Care I, MEP, Laurentian University
2005	Tutor, Midwifery Care II, MEP, Laurentian University
2003	Tutor, Midwifery Care I, MEP, Ryerson University
2001	Teaching Assistant, Introduction to Midwifery, MEP, Ryerson University
1993-5	Teaching Assistant, Writing and Logic, Arts & Science Program, McMaster University
1994	Teaching Assistant, Technology and Society, Arts & Science Program, McMaster University

CONTRIBUTIONS TO TEACHING PRACTICE

Curriculum Development

2018	Chair, Midwifery Education Program Curriculum Retreat (1 day) Led review of entire curriculum, developed plan for addition of new course in level I
2007-2009	Site Lead, Ontario Midwifery Education Program Curriculum Revision working group Revised entire MEP curriculum, developed new course outlines for seven courses

Development of Educational Materials

2016-2018	Chapter author (x2), e-textbooks for midwifery students
2006-2016	Course Coordinator of various Midwifery Education Program courses Created, revised, and updated course materials and resources for tutors and students

SUPERVISORSHIPS

Postdoctoral Fellow

2019-present	Postdoctoral Supervisor. Dr. Cristina Mattison (<i>The integration of midwives in Canadian health systems</i>)
2019-present	Postdoctoral Mentor at ICES McMaster. Dr. Laura Schummers (<i>The CART Mife-Outcomes study: Relating Canada's unique mifepristone regulations to health system events, costs and access to abortion, using linked health administrative data</i>)

Doctoral

- 2020- present Doctoral Supervisor. Susana Ku (*Understanding the impacts of the COVID-19 pandemic on midwifery services in Ontario, Canada and Lima, Peru: A comparative case study*)
- 2020-present Doctoral Supervisor. Erika Campbell (Thesis topic TBC)
- 2019-present Internship Supervisor. Kirsty Bourret (*Evaluating Skill Transfer Between Canadian and Global South Midwifery Associations*)

Masters

- 2020-present MSc Supervisor, Vanessa Hebert, Health Research Methodology
- 2020-present MSc Supervisor, Claire Ramlogan-Salanga, Health Science Education
- 2018-present MSc Supervisor, Lisa Nussey, Health Research Methodology
- 2018-2020 MSc Supervisor, Erica Elderhorst, Health Research Methodology
- 2017-2020 MSc Supervisor, Meagan Furnivall, Health Science Education (*Midwifery students' and obstetrical residents' experiences of learning shared decision-making*)
- 2017-2019 Member, MSc Supervisory Committee, An Ling, Health Science Education (*Midwives' scope of practice and point of care ultrasound*)

Others

- 2020-present Undergraduate Research Supervisor, Aisha Jansen, Mitacs Research Training Award (*Economic evaluations of interventions for underserved pregnant people and new parents: A scoping review*)
- 2020-present Supervisor, Kate Demers, Mentored AOM Research Grant Awardee (*Outcomes of midwifery-led early loss clinic*)
- 2019-2020 Undergraduate Thesis Supervisor, Ava Corey, Arts & Science
- 2019-2020 Undergraduate Thesis Supervisor, Naomi Halbert, Arts & Science
- 2019-present Undergraduate Research Supervisor, Touka Shamkhi, McMaster Midwifery Summer Research Studentship (*Resilience in BIPOC midwifery students*)
- 2019-present Supervisor, Emma Seager, Mentored AOM Research Grant Awardee (*Cervical dilation on hospital admission: supporting best practices to achieve a vaginal delivery*)
- 2017-present Supervisor, Erika Arsenault, Undergraduate student/Mentored AOM Research Grant Awardee (*The POLYamorous childBearing and Birth Experiences Study – POLYBABES*)

- 2017-present Supervisor, Samantha Landry, Undergraduate student/Mentored AOM Research Grant Awardee (*The POLYamorous childBearing and Birth Experiences Study – POLYBABES*)
- 2017-2018 Supervisor, Erica Elderhorst, Mentored AOM Research Grant Awardee (*Induction of Labour Outcomes under Midwifery and Obstetrician Care*)
- 2017-2018 Supervisor, Lisa Nussey, Mentored community midwife (*Inadequate prenatal care at Saint Joseph's Hospital: A chart review*)
- 2018-present Undergraduate Research Supervisor, Beth Currie, Independent Research Project (*Midwives' scope of practice and contraception care: a review of evidence and policies*)
- 2017 Undergraduate Research Supervisor, Amanda Comeau, McMaster Midwifery Summer Research Studentship (*Integration of home birth in eleven countries*)
- 2017 Undergraduate Research Supervisor, Candice Viveiros, McMaster Midwifery Summer Research Studentship (*Access to perinatal mental health care for midwifery clients*)
- 2017 Undergraduate Research Supervisor, Cody Kjell, McMaster Midwifery Summer Research Studentship (*Interventions to improve access to prenatal care for at-risk populations*)

LIFETIME RESEARCH FUNDING

Peer Reviewed Grants

- 2020-2023 The Montfort Postnatal Care at Home Program: How do health outcomes, costs, patient and provider experiences compare with usual hospital-based postnatal care? Peterson W, Salvador A, Cipriano L, Coyle D, **Darling E**, Dunn S, Gravelle A, Leduc D, McCoubrey D, Nault J, Palerme S. CIHR Project Grant. \$451,350
- 2020-2021 Q-Methodology: A Revolutionary Approach to Course Evaluation. Akhtar-Danesh N, Wainman B, **Darling E**, Wojikowski S, Brewer-Deluce D, Jackson T. McMaster Faculty of Health Sciences Education Scholarship Fund. \$25,000.
- 2020-2023 The CART Mife-Outcomes study: Relating Canada's unique mifepristone regulations to health system events, costs and access to abortion, using linked health administrative data. Norman WV (NPA), Henry BJF (Co-PI), McGrail KM (Co-PI), Brooks M, Bryant S, **Darling E**, Davies C, Dunn S, Guilbert E, Guindon E, Kaczorowski J, Law M, Martin-Misener R, Munro S, Renner R, Roussel J, Schummers L, Soon J, Webster G. CIHR Project Grant. \$524,024.
- 2020 Planning to create partnerships and advance research to understand system-level opportunities to expand midwives' contributions to improve access to sexual and reproductive health care. **Darling EK (PI)**, Aerts L, Mattison C, Norman W, Dunn S, Guilbert E. CIHR Planning and Dissemination Grant. \$20,000.
- 2020 Developing a Canadian Strategy to Identify and Prioritize Midwifery Research Capacity and Knowledge Translation. Murray Davis B (PI), **Darling EK**, Hutton EK. CIHR Planning and Dissemination Grant. \$19,368.

- 2020-2021 Outcomes associated with planned place of birth among women with low-risk pregnancies: A 2012-18 update. **Darling EK (PI)**, Angela Reitsma - Association of Ontario Midwives Career Research Grant - \$30,000.
- 2020-2021 Outcomes of a midwifery-led early loss clinic. Demers K (Mentored PI), **Darling E (Supervising PI)**. Association of Ontario Midwives Mentored Midwifery Research Grant - \$4000.
- 2019-2022 Value for money: A mixed methods study to investigate the impact of funding expanded midwifery care models in Canada. **Darling EK (PI)**, Begun S, Cameron C, Gaudet L, Guindon E, Mattison C, Mbuagbaw L, McGee A, Norman W, Tarride J. CIHR Operating Grant: ECI grants in Maternal, Reproductive, Child & Youth Health. \$210,000 (\$105,000 + \$105,000 matched funds).
- 2019-2020 Evaluating Skill Transfer Between Canadian and Global South Midwifery Associations. **Darling E (PI)**, Mattison C, Bourret K. Mitacs Accelerate Grant. \$75,000.
- 2019-2020 Gestational Diabetes Mellitus Screening and Counselling Practices of Antenatal Health Care Providers in Ontario: A mixed methods study. Murray Davis B, **Darling L**, Berger H, Melamed N, Mawjee K, Syed M, Ray JG, Geary M, Barrett J, McDonald SD. Teresa Cascioli Charitable Foundation Research Award in Women’s Health, St. Joseph’s Research Institute Award Program. \$81,000.
- 2019-2023 The Canadian Surgical and Medical Abortion Provider Survey (CAPS). Renner R (PI), Henry B (Co-PI), Wagner MS (Co-PI). Co-investigators: Barrett J, Begun S, Brooks M, Bryant-Lukosius D, Constandriopoulos D, Costescu D, **Darling E**, Davies C, Dunn S, Ferreira E, Gill R, Guilbert E, Kaczowski J, Mansouri S, Martin-Misener R, McGrail K, Munro S, Norman W, Pymar H, Roussel J, Roy G. CIHR Project Grant - \$417,780.
- 2019-2021 Outcomes associated with planned place of birth in low-risk women attended by midwives in Ontario, Canada, 2009-2012. **Darling E (PI)**. Association of Ontario Midwives Career Research Grant - \$14,313.
- 2019-2021 A Randomised Controlled Feasibility Trial of Sodium Bicarbonate for the Prevention of Labour Dystocia. Elderhorst E (Mentored PI), **Darling E (Co-PI)**, Co-Investigators: Hutton E. Association of Ontario Midwives Career Research Grant - \$29,957.
- 2019-2021 Cervical dilation on hospital admission: supporting best practices to achieve a vaginal delivery. Association of Ontario Midwives Mentored Midwifery Research Grant. Seager E (Mentored PI), **Darling E (Supervising PI)** - \$5000.
- 2018-2023 Giving Voice to Mothers: Measuring access to high quality, respectful maternity care in Canada. Vedam S (PI), Co-Investigators: Bayrampour H, Chalmers B, **Darling E**, Gagnon R, Hall W, Janssen P, Kaczowski J, Kendall T, Martin R, Munro S, Norman W, Thiessen K. Canadian Institutes for Health Research - \$883,575.
- 2018-2019 CAMOS: Catalyst to facilitate Access to Mifepristone and Outcomes Study. Schummers L (PI), Co-Investigators: Norman W, McGrail K, **Darling E**, Dunn S. Women’s Health Research Institute, BC Women’s Hospital - \$25,000.

- 2018-2019 Improving maternity care for women living with HIV in Ontario, Canada. Shoemaker E (PI), Smith S (Co-PI). Co-Investigators: Bibeau C, **Darling E**, Hawken S, Kendall C, Loutfy M, Walker M. Canadian Institutes of Health Research, Planning and Dissemination Grant -\$19,520.
- 2018-2019 Planning implementation research to support high quality gender and sexual orientation appropriate medical abortion provision by midwives. Norman W (PI), **Darling E (Co-PI)**, Knowledge Users: Dobbin K, Kendall T. Canadian Institutes of Health Research, Planning and Dissemination Grant -\$15,000
- 2018-2020 Inadequate prenatal care in Hamilton: An investigation into how to improve prenatal care access for marginalized populations. **Darling E (PI)**, Co-Investigators: Nussey L, Hunter A, Simpson S, Small D. Association of Ontario Midwives Career Midwifery Research Grant - \$40,000.
- 2018-2020 Gestational Diabetes, Obesity and Hypertension Among Ontario Midwifery Clients: A mixed methods study. Murray-Davis B (PI), Co-Investigators: **Darling E**, Berger H, Melamed N, Hasan H, Mawjee K, Ray JG, Geary M, Barrett J, and, McDonald S, for DOH-NET (Diabetes, Obesity and Hypertension in Pregnancy Research) and SOON (Southern Ontario Obstetrical Network Investigators. Association of Ontario Midwives Career Midwifery Research Grant - \$40,000.
- 2017-2022 A systems approach for enhancing perinatal care regionalization. Joseph KS (PI). Co-investigators: Williams K, Ray J, Kornelson J, Blake J, Whyte H, Schwartz B, deCaen A, Maynard D, McDonald S, Scott H, Smith G, Coughlin K, Shah P, Fawzy S, Hagan-Johnson A, Caron N, Kramer M, McMicking K, Biringer A, **E Darling**, Leon JA, Carson G, Cook J. Canadian Institutes of Health Research Team Grant -\$1,000,000.
- 2017-2019 Access to midwifery service in Ontario and socioeconomic status. **E Darling (PI)**, M Vanstone (Co-PI), Co-Investigators: EK Hutton, R Ahmed, B Murray-Davis, L Nussey. Association of Ontario Midwives Midwifery Research Grant - \$40,000.
- 2017-2019 The POLYamorous childBearing and Birth Experiences Study – POLYBABES. Association of Ontario Midwives Mentored Midwifery Research Grant. Arseneau E, Landry S (Mentored co-PI), **Darling E (Supervising PI)** - \$5000.
- 2015-2016 Perinatal Mental Health Services in Ottawa: A Needs Assessment. **E Darling (PI)**, Co-Investigators: Bandroska T, Parkin D, Fraser L, Chatelain J. Women’s Xchange Grant - \$15,000.
- 2014-2016 Understanding Factors Related to Evidence-Informed Practice: Attributes, Contextual Factors and Barriers to Use of the Maternal Newborn Dashboard in Ontario. Dunn S (PI), Walker M (Co-PI), Co-Investigators: Sprague AE, Fell DB, Grimshaw JM, **Darling E**, Graham ID, Harrold J, Smith GN, Peterson WE, Taljaard M. Canadian Institutes for Health Research - \$225,086.
- 2011-2014 Vanier Canada Graduate Scholarship. **Darling E (PI)**. The impact of the implementation of the Canadian Paediatric Society's guidelines on the detection, management and prevention of hyperbilirubinemia: a population health perspective. \$150,000.
- 2011-2014 CIHR Fellowship. **Darling E (PI)**. The impact of the implementation of the Canadian Paediatric Society's guidelines on the detection, management and prevention of hyperbilirubinemia: a population health perspective. \$135,000. (Declined)

Non Peer Reviewed Funding

- 2020-2023 Recognizing and responding to violence in the perinatal period. **Darling E (PI)**. Canadian Association of Midwives (Public Health Agency of Canada sub-award). \$67,110.
- 2020-2022 Lyme Disease in Pregnancy. **Darling E (PI)**. D. H. Falle Family Foundation - \$20,000.
- 2020-2021 Identifying facilitators and barriers to midwives' mental health. **Darling E (PI)**. Association of Ontario Midwives - \$30,000.
- 2019-2021 The integration of midwives into Canadian health systems. **Darling E (PI)**. McMaster Midwifery Research Fund (Postdoctoral funding for Dr. Cristina Mattison) \$140,000.
- 2017-2022 Evaluation of an Alongside Midwifery Unit – Markham Stouffville Hospital. **Darling E (PI)**, Murray-Davis B (Co-PI). MOHLTC/Markham Stouffville Hospital - \$150,000.
- 2017-2020 Non-indicated midwife to obstetrician transfers of care. **Darling E (PI)**. Department of Obstetrics & Gynecology Start-up Funds - \$240,000.
- 2014-2017 Understanding Factors Related to Evidence-Informed Practice: Attributes, Contextual Factors and Barriers to Use of the Maternal Newborn Dashboard in Ontario. Dunn S (PI), Walker M (Co-PI), Co-Investigators: Sprague AE, Fell DB, Grimshaw JM, **Darling E**, Graham ID, Harrold J, Smith GN, Peterson WE, Taljaard M. MOHLTC HSRF Capacity Award - \$730,447.
- 2011-2012 The Canadian Minimum Midwifery Dataset Project. **Darling E (PI)**. Public Health Agency of Canada - \$4350.

LIFE-TIME PUBLICATIONS

Italics * - indicates trainee

Underlined – indicates supervising/senior author

Peer Reviewed

Journal articles

1. **Darling EK**, Murray-Davis B, Ahmed RJ, Vanstone M. Access to Ontario Midwifery Care by Neighbourhood-Level Material Deprivation Quintile, 2006–2017: A Retrospective Cohort Study. Canadian Journal of Midwifery Research and Practice. 2020;19(2):8-23.
2. *Nussey L**, *MacDonald T**, Murray-Davis B, Vanstone M, **Darling EK**. Community as client – the work of midwives to increase access to midwifery care: A qualitative descriptive study. Canadian Journal of Midwifery Research and Practice. 2020;19(2):24-39.
3. **Darling EK**, *MacDonald T**, *Nussey L**, Murray-Davis B, Vanstone M. Making midwifery services accessible to people of low SES: A qualitative descriptive study of the barriers faced by midwives in Ontario. Canadian Journal of Midwifery Research and Practice. 2020;19(2):40-52.

4. Reszel J, Weiss D, **Darling EK**, Sidney D, Van Wagner V, Soderstrom B, Rogers J, Holmberg V, Peterson W, Khan B, Walker MC, Sprague A. Client experience with the Ontario Birth Center demonstration project. *Journal of Midwifery and Women's Health*. 2020. [epub ahead of print].
<https://doi.org/10.1111/jmwh.13164>
5. *Currie B**, Marquez O, **Darling EK**. The safety and feasibility of contraception care by midwives and other nonphysician providers: a scoping review of randomized control trials. *Canadian Journal of Midwifery Research and Practice*. 2020;19(1):6-19.
6. **Darling EK**, Babe G, Sorbara C, Perez R. Trends in very early discharge from hospital for Ontario midwifery clients from 2003-2017: a cohort study. *CMAJ Open* 2020, 8(2):E462-E468. doi: 10.9778/cmajo.20190165
7. Ouellette A, **Darling EK**, Sivapathsundaram B, Babe G, Perez R, Chan AKC, Chanchlani R. Incidence, Risk Factors, and Outcomes of Neonatal Renal Vein Thrombosis in Ontario: Population-Based Cohort Study. *Kidney* 360 2020, 1(7):640-647. DOI: <https://doi.org/10.34067/KID.0000912019>
8. *Nussey L**, Hunter A, Malhi R, Kreuger S, Small D, Giglia L, Patel T, Seigel S, Simpson S, Wasser R, **Darling EK**. Risk factors and outcomes associated with inadequate prenatal care: A retrospective chart review. *Journal of Obstetrics and Gynecology of Canada* 2020; 42(5):591-600. doi: 10.1016/j.jogc.2019.08.005. Epub 2019 Dec 7.
9. Dunn S, Lanes A, Sprague AE, Fell DB, Weiss D, Reszel J, Taljaard M, **Darling EK**, Graham ID, Grimshaw JM, Harrold J, Smith GN, Peterson WE, Walker M. Data accuracy in the Ontario Birth Registry: A chart re-abstractation study. *BMC Health Services Research* 2019; 19:1001. <https://doi.org/10.1186/s12913-019-4825-3>
10. *Friedman C**, Ahmed R, Hutton EK, **Darling EK**. Resident Attitudes Towards Caesareans in Canadian Obstetrics and Gynaecology Residency Programs. *Journal of Obstetrics and Gynecology of Canada* 2020; 42(1):16-24. doi: 10.1016/j.jogc.2019.06.013. Epub 2019 Nov 29.
11. **Darling EK**, Grenier L, Nussey L, Murray-Davis B, Hutton E, Vanstone M. Barriers and facilitators of access to midwifery care in Ontario for people of low socioeconomic status: Findings of a qualitative investigation. *BMC Pregnancy and Childbirth* 2019; 19:416. <https://doi.org/10.1186/s12884-019-2577-z>
12. *Areseneau E**, *Landry S**, **Darling EK**. The POLYamorous childbearing And Birth Experiences Study (POLYBABES): A qualitative study of the health care experiences of polyamorous families during pregnancy and birth. *CMAJ*. 2019; 191(41):E1120-E1127. DOI: <https://doi.org/10.1503/cmaj.190224>
13. Dzakpasu S, Deb-Rinker P, Arbour L, **Darling EK**, Kramer MS, Liu S, Luo W, Murphy PA, Nelson C, Ray JG, Scott H, VandenHof M, Joseph KS. Severe maternal morbidity surveillance: Monitoring pregnant women at high risk for prolonged hospitalization and death. *Paediatric and Perinatal Epidemiology* 2019;00:1–13. DOI: 10.1111/ppe.12574
14. **Darling EK**, Burton N, Marquez O, Bennett N. Outcomes of uninsured people cared for by Ontario midwives: A population-based retrospective cohort study. *Midwifery*. 2019;77:24-31. doi: 10.1016/j.midw.2019.06.009. Epub 2019 Jun 19.
15. Dzakpasu S, Deb-Rinker P, Arbour L, **Darling EK**, Kramer MS, Liu S, Luo W, Murphy PA, Nelson C, Ray JG, Scott H, VandenHof M, Joseph KS. Severe maternal morbidity in Canada: Temporal trends and regional

variations, 2003-2016. Journal of Obstetrics and Gynaecology of Canada.
[https://www.jogc.com/article/S1701-2163\(19\)30089-1/pdf](https://www.jogc.com/article/S1701-2163(19)30089-1/pdf)

16. Reszel J, Dunn SI, Sprague AE, Graham ID, Grimshaw JM, Peterson WE, Ockenden H, Wilding J, Quosdorf A, **Darling EK**, Fell DB, Harrold J, Lanes A, Smith GN, Taljaard M, Weiss D, Walker MC. Use of a maternal newborn audit and feedback system in Ontario: A collective case study. *BMJ Quality & Safety* 2019; 28(8):635-644. doi:10.1136/bmjqs-2018-008354
17. *Elderhorst E**, Ahmed R, Hutton EK, **Darling EK**. Birth outcomes for midwifery clients who begin post-dates induction of labour under midwifery care compared with those who are transferred to obstetrical care. *Journal of Obstetrics and Gynaecology of Canada* 2019; 41(10):P1444-1452.
<https://doi.org/10.1016/j.jogc.2018.11.024>
18. *Viveiros CJ**, **Darling EK**. Perceptions of barriers to accessing perinatal mental health care in midwifery: A scoping review. *Midwifery* 2019; 70:106-118 . <https://doi.org/10.1016/j.midw.2018.11.011>
19. *Viveiros CJ**, **Darling EK**. Barriers and facilitators of accessing perinatal mental health services: The perspectives of women receiving continuity of care midwifery. *Midwifery* 2018.
<https://doi.org/10.1016/j.midw.2018.06.018>
20. **Darling EK**, Lawford KM, Wilson K, Kryzanauskas M, Bourgeault I. Distance from home birth to emergency obstetrical services and neonatal outcomes: A cohort study. *Journal of Midwifery & Women’s Health* 2018. doi: 10.1111/jmwh.12896.
21. Sprague AE, Sidney D, **Darling EK**, Van Wagner V, Soderstrom B, Rogers J, Graves E, Coyle D, Sumner A, Holmberg V, Khan B, Walker M. Outcomes for The First Year of Ontario’s Birth Centre Demonstration Project. *Journal of Midwifery and Women’s Health* 2018; 65:8-15. doi:10.1111/jmwh.12884.
22. Reszel J, Sidney D, Peterson W, **Darling EK**, Van Wagner V, Soderstrom B, Rogers J, Graves E, Khan B, Sprague A. The integration of Ontario birth centres into existing maternal newborn services – care provider experiences. *Journal of Midwifery and Women’s Health* 2018. <https://doi.org/10.1111/jmwh.12883>
23. Nelson C, Lawford KM, Otterman V, **Darling EK**. Mental health indicators among pregnant Aboriginal women in Canada: Results from the Maternity Experiences Survey. *Health Promotion and Chronic Disease Prevention in Canada* 2018. 38(7/8):269-76. <https://doi.org/10.24095/hpcdp.38.7/8.01>
24. *Comeau A**, Hutton EK, Simioni J, Anvari E, Bowen M, Kruegar S, **Darling EK**. Home birth integration within health care systems of eleven international jurisdictions. *Birth* 2018; doi: 10.1111/birt.12339.
25. Weiss D, Dunn S, Sprague AE, Fell DB, Grimshaw JM, **Darling E**, Graham ID, Harrold J, Smith GN, Peterson WE, Reszel J, Lanes A, Walker M, Taljaard M. Effect of a population-level performance dashboard intervention on maternal-newborn outcomes: an interrupted time series study. *BMJ Qual Saf* 2018; 27:425-436.
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PRESENTATIONS AT MEETINGS*Italics* * - indicates traineeUnderlined – indicates presenter**Peer Reviewed**

1. Shamki T*, Ramlogan-Salanga C*, **Darling E**. How racialized midwifery students in Ontario experience resilience. Canadian Association of Midwives November (online conference). November, 2020. (Oral, National)
2. Seager E*, **Darling E**. Cervical dilation on hospital admission: supporting best practices to achieve a vaginal delivery. Canadian Association of Midwives November (online conference). November, 2020. (Oral, National)
3. Mattison CA*, Bourret K*, Robinson J, Hebert E, **Darling E**. Building the evidence for best practices in midwifery skills transfer and reciprocal midwifery association strengthening. Canadian Association of Midwives November (online conference). November, 2020. (Oral, National)
4. Schummers L*, **Darling EK**, Gayoswky A, Dunn S, McGrail K, Law MR, Laba TL, Norman WV. Do medication abortion complications increase without regulations restricting mifepristone practice? a population-based study using single-payer linked health administrative data from Ontario, Canada, 2012-2019. Research presentation at the National Abortion Federation of Canada Annual Meeting November 21, 2020. Virtual presentation due to COVID-19. (Oral, National)
5. Schummers L*, **Darling EK**, Gayoswky A, Dunn S, McGrail K, Law MR, Laba TL, Norman WV. Do medication abortion complications increase without regulations restricting practice? a population-based study using single-payer linked health administrative data? Plenary presentation at the Royal Society of Medicine, Sexuality and Sexual Health Annual Meeting: Excellence in adversity: Abortion care in the coronavirus pandemic. October 12, 2020. Virtual presentation due to COVID-19. (Oral, International)
6. Schummers L*, **Darling EK**, Dunn S, McGrail K, Law MR, Laba TL, Norman WV. Do medication abortion complications increase when restrictive Risk Evaluation and Mitigation Strategy regulations are removed? A population-based study using single-payer linked health administrative data. Presented during the “Spotlight on Science Plenary Session” at the 2020 Society of Family Planning Annual Meeting (one of 4 abstracts accepted for the premier plenary session; ranked 2nd of >350 abstracts); October 9, 2020. Virtual presentation due to COVID-19. (Oral, International)
7. Schummers L*; **Darling EK**, Dunn S, McGrail K, Law MR; Lea-Laba T; Norman WV. Keynote address: Outcomes when mifepristone is available as a normal prescription: A population-based interrupted time series study using single-payer linked health administrative data. 2020 International Federation of Professional Abortion and Contraception Associates Annual Conference. Berlin, Germany: September 21, 2020 (Postponed due to COVID-19). (Oral, International)
8. **Darling EK**, Deluce S. Non-indicated transfers of care from midwives to physicians in Ontario, Canada. 32nd International Confederation of Midwives Congress, Bali, Indonesia. June 2, 2020 (Postponed to 2021 due to COVID-19). (Oral, International)

9. Schummers L*, **Darling EK**, Dunn S, Gayowsky A, McGrail K, Law MR, Norman WV. Induced abortion in Canada: Developing methods for accurate surveillance and complication reporting. Academic Perinatology Rounds, UBC Obstetrics & Gynecology. Vancouver, BC, April 22, 2020. (Postponed due to COVID-19).
10. Van Wagner, **Darling EK**. Disputing Evidence: Responses of the Canadian medical establishment to evidence about midwifery care. Canadian Association of Midwives' Annual Conference, Halifax, Nova Scotia, Canada, October 25, 2019. (Oral, National)
11. Bourret K*, Mattison CA, **Darling EK**. Measuring the impact of the Canadian Association of Midwives' global projects. Canadian Association of Midwives' Annual Conference, Halifax, Nova Scotia, Canada, October 24, 2019. (Oral, National)
12. **Darling EK**, Deluce S*. Non-Indicated Transfers of Care from Midwives to Physicians in Ontario. Canadian Association of Midwives' Annual Conference, Halifax, Nova Scotia, Canada, October 24, 2019. (Oral, National)
13. Van Wagner, **Darling EK**. Disputing Evidence: Responses of the Canadian medical establishment to evidence about midwifery care. Joan Donley Midwifery Research Forum, Palmerston North, New Zealand. September 13, 2019. (Oral, International)
14. Deluce S*, **Darling EK**. Non-indicated transfers of care from midwives to obstetricians. SOCG Annual Clinical and Scientific Meeting, Halifax, June 2019. (Oral, National)
15. **Darling E**, Grenier L, Nussey L, Murray Davis B, Ahmed R, Hutton EK, Vanstone M. Barriers and facilitators of access to midwifery care for people of low socio-economic status: a qualitative descriptive study. Canadian Association of Health Services and Policy Research, Halifax, May 2019. (Oral, National)
16. Nussey L*, **Darling E**. Midwifery work to increase access to midwifery care for people of low socio-economic status: findings from a qualitative study. Canadian Association of Health Services and Policy Research, Halifax, May 2019. (Oral, National)
17. **Darling EK**, Murray Davis B, Ahmed R, Hutton EK, Vanstone M. Access to midwifery care for people of low socio-economic status: findings from a quantitative study. Canadian Association of Health Services and Policy Research, Halifax, May 2019. (Poster, National)
18. **Darling E**, Grenier L, Nussey L, Murray Davis B, Ahmed R, Hutton EK, Vanstone M. Access to midwifery care for people of low socio-economic status. Ontario Midwifery Conference (Association of Ontario Midwives), Markham, May 2019. (Oral, Provincial)
19. Nussey L*, **Darling E**. Midwifery work to increase access to midwifery care for people of low socio-economic status: findings from a qualitative study. Ontario Midwifery Conference (Association of Ontario Midwives), Markham, May 2019. (Oral, Provincial)
20. **Darling E**. Access to midwifery care in Ontario for people of low socio-economic status: findings from a quantitative study. Ontario Midwifery Conference (Association of Ontario Midwives), Markham, May 2019. (Oral, Provincial)

21. Friedman C*, Ahmed R, Hutton EK, **Darling EK**. Resident attitudes towards caesareans in Canadian Obstetrics and Gynecology Residency Programs. Society of Obstetricians and Gynaecologists of Canada Ontario CME, Toronto, Dec 2018. (Poster, National)
22. **Darling EK**, Grenier L, Nussey L, Murray Davis B, Ahmed R, Hutton EK, Vanstone M. Access to midwifery care for people of low socio-economic status. Association of Ontario Midwives Research Symposium, Toronto, Nov 2018. (Oral, Provincial)
23. Nussey L*, Krueger S, Mahli R, Hunter A, Seigel S, Giglia L, Small D, Wasser R, Simpson S, **Darling E**. Socio-demographic characteristics and clinical outcomes of people receiving inadequate prenatal care: A retrospective cohort study. Association of Ontario Midwives Research Symposium, Toronto, Nov 2018. (Oral, Provincial)
24. **Darling EK**, Grenier L, Nussey L, Murray Davis B, Ahmed R, Hutton EK, Vanstone M. Access to midwifery care for people of low socio-economic status. Canadian Association of Midwives (CAM) Annual Conference, Gatineau, Oct 2018. (Oral, National)
25. Bacon A, Robinson K, Robertson Bly J, **Darling EK**. Canadian Midwifery Mifepristone Implementation. Canadian Association of Midwives (CAM) Annual Conference, Gatineau, Oct 2018. (Oral, National)
26. Elderhorst E*, Ahmed R, Hutton EK, **Darling EK**. Birth outcomes for midwifery clients who begin post-dates induction of labour under midwifery care compared with those who are transferred to obstetrical care. Canadian Association of Midwives (CAM) Annual Conference, Gatineau, Oct 2018. (Oral, National)
27. Ouellette AC*, **Darling E**, Babe G, Perez R, Chan AC, Chanchlani R. Incidence, Risk factors and Long-Term Outcomes of Neonatal Renal Vein Thrombosis in Ontario: A Population-Based Cohort Study. American Society of Nephrology Kidney Week, San Diego, USA, Oct 2018. (Poster, International)
28. Landry S*, Arseneau E*, Neustifter R, **Darling E**. Results and implications of the POLYamorous childbearing and Birth Experiences Study. Canadian Sex Research Forum, Toronto, Oct 2018.
29. Landry S*, Arseneau E*, Neustifter R, **Darling E**. Barriers to care and strategies for improving health services for polyamorous individuals and families during pregnancy, childbirth, and beyond. Guelph Sexuality Conference, June 2018.
30. **Darling EK**, Olszewski H. Numbers and stories: BORN data and the case for having good numbers to tell the stories you want to tell. Ontario Midwifery Conference, Muskoka, May 2018. (Oral, Provincial)
31. Viveiros C*, **Darling EK**. Barriers and facilitators of accessing perinatal mental health services: The perspectives of women receiving continuity of care midwifery. Ontario Midwifery Conference, Muskoka, May 2018. (Oral, Provincial)
32. Friedman C*, Ahmed R, Hutton EK, **Darling EK**. Resident attitudes towards caesareans in Canadian Obstetrics and Gynecology Residency Programs. McMaster Medical Research Day, Hamilton, April 2018. (Poster, Local)
33. Viveiros C*, **Darling EK**. Barriers and facilitators of accessing perinatal mental health services: The perspectives of women receiving continuity of care midwifery. Association of Ontario Midwives Research Symposium, Hamilton, Nov 2017. (Oral, Provincial)

34. Comeau A*, Hutton EK, Simioni J, Anvari E, Bowen M, Kruegar S, **Darling EK**. Home birth integration within health care systems of eleven international jurisdictions. Association of Ontario Midwives Research Symposium, Hamilton, Nov 2017. (Oral, Provincial)
35. Landry S*, Arseneau E*, Neustifter R, **Darling E**. Results and implications of the POLYamorous childbearing and Birth Experiences Study. Association of Ontario Midwives Research Symposium, Hamilton, Nov 2017. (Oral, Provincial)
36. **Darling EK**, Van Wagner V. Do low risk definitions assist our understanding of midwifery practice or policy? Triennial International Confederation of Midwives Congress, Toronto, June 2017. (Oral, International)
37. Van Wagner V, **Darling EK**. What does continuity of care look like in the Ontario Model of Midwifery? Triennial International Confederation of Midwives Congress, Toronto, June 2017. (Oral, International)
38. Kryzanasuskas M, **Darling EK**, Lawford K, Wilson K, Bourgeault I. Birth outcomes and distance from planned homebirths to emergency obstetrical services. Triennial International Confederation of Midwives Congress, Toronto, June 2017. (Oral, International)
39. **Darling L**, Glynn B, Fraser L. Perinatal mental health service delivery models: a scoping review. Canadian Association of Health Services and Policy Research Conference, Toronto, May 2017. (Oral, National)
40. **Darling L**, Bennett N, Burton N. Midwifery care for uninsured women: A look at the numbers. BORN Conference, Toronto, April 2017. (Oral, Provincial)
41. **Darling L**, Glynn B, Fraser L. Perinatal mental health service delivery models: a scoping review. Canadian National Perinatal Research Meeting, Montebello, Feb 2017. (Poster, National)
42. **Darling EK**, Lawford K, Wilson K, Kryzanasuskas M, Bourgeault I. Birth outcomes and distance from planned homebirths to emergency obstetrical services. Canadian Association of Midwives (CAM) Annual Conference, Victoria, Nov 2016. (Oral, National)
43. Nelson CRM, Otterman V, **Darling L**, Lawford KO. Mental health indicators among pregnant Aboriginal women in Canada: Results from the Maternity Experiences Survey (MES). SOGC Annual Clinical and Scientific Conference, Vancouver, June 2016. (Poster, National)
44. Dunn S, Sprague A, **Darling L**, Graham I, Harrold J, Lanes A, Peterson W, Reszel J, Taljaard M, Truskoski C, Fell D, Grimshaw J, Smith G, Wilding J, Walker M. Perceptions and use of an audit and feedback system: A survey of maternal newborn units in Ontario. KT Canada Annual Scientific Meeting, Toronto, June 2016. (Poster, National)
45. Dunn S, Sprague A, **Darling L**, Graham I, Harrold J, Lanes A, Peterson W, Reszel J, Taljaard M, Truskoski C, Fell D, Grimshaw J, Smith G, Wilding J, Walker M. Organizational Readiness for Knowledge Translation (OR4KT) in Ontario Maternal Newborn Hospitals: Results of a Provincial Survey. KT Canada Annual Scientific Meeting, Toronto, June 2016. (Poster, National)
46. **Darling EK**. Supporting perinatal mental health: Best practice tips for midwives. Association of Ontario Midwives Annual Conference, Niagara Falls, May 2016. (Oral, Provincial)

47. **Darling EK**, Sorbara C. Promoting normal birth in Ontario: Evidence for best practice and the BORN data. Association of Ontario Midwives Annual Conference, Niagara Falls, May 2016. (Oral, Provincial)
48. Sidney D, Graves E, Holmberg V, **Darling E**, Rogers J, Soderstrom B, Van Wagner V, Khan B, Walker M, Weiss D, Yang C, Sprague A. Rates of intervention in Ontario's birth centre demonstration project. AOM Annual Conference, Niagara Falls, May 2016. (Poster, Provincial)
49. **Darling L**, Glynn B, Bandrowska T, Parkin D, Fraser L, Chatelain J. Service user and health care provider perceptions of perinatal mental health service needs in Ottawa: A qualitative investigation. Canadian Association of Health Services and Policy Research Annual Conference, Toronto, May 2016. (Poster, National)
50. Truskoski C, Peterson W, Reszel J, Sprague A, Graham ID, Grimshaw J, Fell D, **Darling L**, Harrold J, Smith G, Taljaard M, Graves E, Lanes A, Walker M, Dunn S. Understanding Implementation Issues Related to Use of an Electronic Audit and Feedback System in Ontario: The BORN Maternal Newborn Dashboard. Canadian National Perinatal Research Meeting, Banff, Feb 2016. (Poster, National - Award for best poster)
51. **Darling EK**, Ramsay T, Manuel D, Sprague AE, Walker MC, Guttman A. Association of hyperbilirubinemia guidelines with newborn follow-up care and socioeconomic disparities in follow-up. Canadian Association of Health Services and Policy Research Annual Conference, Montreal, May 2015. (Oral, National)
52. Dunn S, Peterson W, Rohde K, Sprague A, Graham ID, Grimshaw J, Fell D, **Darling L**, Harrold J, Smith G, Taljaard M, Graves E, Lanes A, Walker M. Barriers and facilitators to use of an electronic audit and feedback system for quality improvement - Maternal Newborn Dashboard in Ontario. KT Canada Scientific Meeting, Halifax, May 2015. (Poster, National)
53. **Darling EK**, Ramsay T, Manuel D, Sprague AE, Walker MC, Guttman A. Association of hyperbilirubinemia guidelines with newborn follow-up care and socioeconomic disparities in follow-up. Canadian National Perinatal Research Meeting, Montebello, Feb 2015. (Oral, National)
54. **Darling EK**. Can clinical practice guidelines increase health care disparities? Exploring unintended consequences. CAM Annual Conference, Saskatoon, Nov 2014. (Oral, National)
55. **Darling EK**. Using data to promote high quality midwifery care: the use of standardized midwifery reports by practicing midwives. International Confederation of Midwives Triennial Congress, Prague, June 2014. (Oral, International)
56. Dunn S, Sprague A, Grimshaw J, Graham ID, Fell D, Smith G, Harrold J, Taljaard M, Peterson W, **Darling L**, El-Khatib Z, Graves E, Walker M. The Ontario Maternal Newborn Dashboard (MND) - Knowledge-to-Action through Audit and Feedback. KT Canada Scientific Meeting, Quebec, June 2014. (Poster, National)
57. **Darling EK**. Implementing universal neonatal bilirubin screening: lessons learned through a survey of Ontario hospitals. Canadian Association of Perinatal & Women's Health Nurses Annual Conference, Niagara Falls, Nov 2013. (Oral, National)
58. **Darling EK**. The implementation of the CPS's universal bilirubin screening guidelines: implications for midwives. CAM Annual Conference, St. John's, Oct 2012. (Oral, National)

59. **Darling EK**. The impact of the implementation of universal bilirubin screening in Ontario: Findings of a survey of Ontario hospitals and implications for midwives. AOM Annual Conference, Toronto, May 2012. (Oral, Provincial)
60. **Darling EK**. The Canadian Minimum Midwifery Dataset Project. AOM Annual Conference, Toronto May 2012. (Oral, Provincial)
61. **Darling EK**. Midwifery Databases: Streamlining, Expanding, and Going Public in the US and Canada. North American Midwifery Conference: Beyond Boundaries, Niagara Falls, Nov 2011. (Oral, International)
62. **Darling EK**. Teaching confidence and competence in homebirth: how can we best support learners? CAM Annual Conference, Edmonton, Oct 2010. (Oral, National)
63. **Darling EK**. VBAC with a midwife in Ontario: Context, Clinical Outcomes, and Challenges. AOM Annual Conference, Niagara Falls, May 2010. (Oral, Provincial)
64. **Darling EK**. Birth outcomes of women with a history of caesarean section: a descriptive study of clients of Ontario midwives. CAM Annual Conference, Quebec City, Nov 2008. (Oral, National)
65. **Darling EK**. Mandatory Prophylaxis for Ophthalmia Neonatorum: Does the Evidence Support the Policy? AOM Annual Conference, Toronto, May 2008. (Oral, Provincial)
66. **Darling EK**. Crossing Professional Boundaries in Canadian Maternity Care: Barriers and Facilitators to Collaborative Practice. CAM Annual Conference, Vancouver, Nov 2007. (Oral, National)

Invited (Non Peer Reviewed)

1. **Darling E**, Nussey L. Access to midwifery Care for People of Low Socio-Economic Status. Association of Ontario Midwives Webinar, Online, January 19, 2021. (Oral, Provincial)
2. **Darling E**. Improving Access to Midwifery Care in Canada: Research Insights to Shape the Future. McMaster Midwifery Research Symposium, Online, Oct 2020. (Oral, National)
3. **Darling E**, Demers K, Huntly J, Kirby N, Merritt S, Suleman S, Tregaskiss N, Vigneault M. Emerging Models of Midwifery Care. McMaster Midwifery Research Symposium, Online, Oct 2020. (Oral, National)
4. *Schummers L**; **Darling EK**, Dunn S, Gayowsky A, McGrail K, Law MR; Lea-Laba T; Norman WV. Abortion utilization and safety when mifepristone is approved for medication abortion without restrictions: a population-based cohort study from Ontario. BC Children's Hospital Research Institute: Invited Seminar. Vancouver, BC: November 4, 2020. (Oral, Provincial)
5. **Darling E**. Lessons learned from the implementation of Canada's first alongside midwifery unit: A explanatory case study. Markham Stouffville Hospital Rounds, Markham, June 2020. (Oral, Local)
6. **Darling E**. Early hospital discharge of Ontario midwifery clients: Trends over time. Markham Stouffville Hospital Rounds, Markham, Apr 2019. (Oral, Local)

7. **Darling E.** Early hospital discharge of Ontario midwifery clients: Trends over time. McMaster Midwifery Research Symposium, Hamilton, Mar 2019. (Oral, Provincial)
8. **Landry S***, **Arseneau E***, **Darling E**, Neustifter R. The POLYamorous childbearing and Birth Experiences Study (POLYBABES). Association of Ontario Midwives Webinar, Toronto, Dec 2018. (Oral, Provincial)
9. **Bishop L**, **Darling EK**, **Robertson Bly J**, **McGee A**. Expanded Midwifery Care Models. Association of Ontario Midwives Annual General Meeting, Muskoka, May 2018. (Oral, Provincial)
10. **Darling E**, **Van Wagner V**, **Gratton R**, **Bassi C**. Place of birth – promoting low risk births. Maternal and Newborn Health: Current Developments and Future Directions. Ontario Hospital Association, Toronto, March 2017. (Oral, Provincial)
11. **Sgro M**, **Darling E**, **Zettle R**. Pitfalls in the Hospital-Based Management of Newborn Jaundice and the Prevention of Kernicterus. Ontario Hospital Association, Toronto, Nov 2015. (Oral, Provincial)
12. **Darling EK**, **Hutton EK**, **Renfrew M**. A midwife for every woman: why midwifery-led research is key. CAM Annual Conference, Ottawa, Nov 2013.
13. **Darling EK**, **Gagnon G**. Midwifery-led Birth Centres in Ontario: A new option for families. CMNRP's Annual Maternal Newborn Conference, Ottawa, May 2013.
14. **Darling EK**, **Holmberg V**, **Sidney D**. BORN Standard Reports: Making it Easier to Understand and Improve Your Outcomes. Association of Ontario Midwives (AOM) Annual Conference, Mono, May 2013.
15. **Darling EK**. Is Mandatory Eye Prophylaxis Ethically Justified?: A consideration of context, clinical evidence and ethics. CMNRP's Annual Maternal Newborn Conference, Ottawa, May 2012.
16. **Darling EK**. Putting the Evidence into Practice: A Midwife-Led, Evidence Based Approach to Reducing the C-Section Rate in Ontario. AOM Workshop: A Midwife-Led, Evidence Based Approach to Reducing the C-Section Rate in Ontario, Ottawa, Jan 2012.
17. **Darling EK**. Vaginal Birth After Cesarean Section: Outcomes of Women Receiving Midwifery Care in Ontario. AOM Workshop: A Midwife-Led, Evidence Based Approach to Reducing the C-Section Rate in Ontario, Ottawa, Jan 2012.
18. **Darling EK**. Critical appraisal skills for guideline development: Beyond the critical appraisal checklist. CIHR-funded AOM workshop: Clinical Practice Guideline Development, Toronto, Sept 2010.
19. **Darling EK**. Midwifery Outcomes Data: The Contributions of Midwives to Perinatal Health Surveillance in Ontario. AOM Annual Conference, Toronto, May 2008.
20. **Darling EK**. Growth of Ontario Midwifery: Implications for Midwifery Across Canada. AOM Annual Conference, Toronto, May 2008.

ADMINISTRATIVE RESPONSIBILITIES

Department

- 2019-present Member, OMEP Placement Committee
- 2018-present Member, Ontario Midwifery Education Program (OMEP) Directors Committee
- 2018-present Chair, OMEP Faculty Council
- 2018-present Chair, OMEP Management Committee
- 2006-2018 Member, OMEP Faculty Council
- 2015-2016 Member, OMEP Placement Committee
- 2015 Acting Director (Oct-Dec), Laurentian University Midwifery Education Program
- 2007-2011 Chair, OMEP Curriculum Committee
- 2008-2011 Chair, OMEP Course Coordinator's Committee
- 2007-2009 Member, OMEP Curriculum Revision working group
- 2007 Member, OMEP Curriculum Committee
- 2006-2007 Member, OMEP Course Coordinator's Committee

Faculty

- 2019-20 Member, McMaster Institute for Health Equity Director Selection committee
- 2020 Member, MMaSH Re-Introduction of Learners Committee
- 2020 Member, Surge Contingency Working Group
- 2020 Member, Re-appointment Committee for Assistant Dean, Bachelor of Health Sciences
- 2020 Member, Selection Committee for Chair, Obstetrics & Gynecology Development
- 2019 Member, Selection Committee for Assistant Dean, Program for Faculty Development
- 2019 Member, John Sibley Part-time Teaching Award Selection Committee
- 2019 Member, Faculty of Health Sciences Indigenous Faculty Recruitment Retreat
- 2018-present Assistant Dean, Midwifery

- 2018-present Member, Health Sciences Education Committee
- 2018-present Member, Michal DeGroot School of Medicine Council
- 2018-present Member, Valedictorian Selection Committee Member

University

- 2019 Member, McMaster Institute of Health Equity Director Selection Committee

External

- 2018-present Member, Faculty Advisory Committee, IC/ES
- 2016-present Member, International Confederation of Midwives, Research Standing Committee
- 2014-present Member, Research Working Group/Scientific Committee (member), AOM
- 2014-present Chair, Midwifery Advisory Committee, BORN-Ontario
- 2013-present Member, Expert Advisory Committee, Canadian Perinatal Surveillance System
- 2016-2018 Member, Newborn Screening Ontario's Midwifery CCHD Task Force
- 2012-2018 Member, Birth Centre Evaluation Working Group, BORN-Ontario
- 2015-2017 Chair, Expert Advisory Panel on Place of Birth, Association of Ontario Midwives
- 2015-2016 Member, Emergency Skills Work Group, Association of Ontario Midwives
- 2015-2016 Leadership Team, Low Risk Maternity Care Expert Panel, Provincial Council for Maternal and Child Health
- 2014-2016 Member, Research Committee, Ottawa Birth and Wellness Centre
- 2013-2016 Board Member, Canadian Association for Midwifery Education
- 2011-2015 Chair, Eye Prophylaxis sub-committee, Association of Ontario Midwives
- 2012-2014 Member, Neonatal Hyperbilirubinemia Task Force, Maternal-Child Screening Committee, Provincial Council for Maternal and Child Health & BORN-Ontario
- 2013 Member, Hyperbilirubinemia Clinical Expert Advisory Group, Provincial Council for Maternal and Child Health
- 2013 Member, Vaccine Acceptance and Uptake Task Group, Vaccine System Review, Ministry of Health and Long-Term Care, Ontario

- 2010-12 Member, Quality & Performance Management Committee, Champlain LHIN Maternal-Newborn Program
- 2008-2015 Chair, Clinical Practice Guidelines Working Group, Association of Ontario Midwives
- 2008-2012 Member, Canadian Perinatal Surveillance System
- 2008-2010 Member, NIDAY Perinatal Database Steering Committee
- 2008-2009 Member, Champlain LHIN Maternal-Newborn Metrics & Evaluation Task Force
- 2007-2010 Member, Better Outcomes Registry Network (formerly Ontario Perinatal Surveillance System) Steering Committee
- 2008 Member, Provincial Child Health Council's Fetal Fibronectin Working Group
- 2002-2004 Member, Obstetrical Care Review Committee for the Office of the Chief Coroner of Ontario
- 2001-2002 Member, Database Working Group, Association of Ontario Midwives

OTHER RESPONSIBILITIES

- 2017-2018 Participant, Faculty of Health Sciences Academic Leadership Program, McMaster University

Beth Murray-Davis

NAME Beth Murray-Davis

ADDRESS Midwifery Education Program, McMaster University
1280 Main Street West
Health Sciences Centre, 4H24H
Hamilton, Ontario
L8S 4K1
Telephone: 905-525-9140 ext 21596
Email: bmurray@mcmaster.ca

EDUCATIONAL BACKGROUND

Degrees and Diplomas

2011 Postdoctoral Fellowship, McMaster University
2010 PhD, University of Sheffield
2006 MA, University of Toronto
2003 BHSC, Midwifery, McMaster University
1999 BA, Sociology, University of Guelph

Qualifications, Licensures and Certifications

Registered Midwife, College of Midwives of Ontario, Ontario, Canada

CURRENT STATUS AT MCMASTER

2016-Present Associate Professor, Obstetrics and Gynecology, Midwifery Education Program, Faculty of Health Sciences, McMaster University. Continuing Appointment without Annual Review.

2019-Present Scientific Director, McMaster Midwifery Research Centre: <https://mmrc.mcmaster.ca/>

PROFESSIONAL ORGANIZATIONS

College of Midwives of Ontario
Association of Ontario Midwives
Canadian Association of Midwives
Society of Obstetricians and Gynecologists of Canada
Centre for the Advancement of Interprofessional Education
Canadian Interprofessional Health Collaborative

EMPLOYMENT HISTORY

McMaster University Appointments

2016 – present	Associate Professor, Obstetrics and Gynecology, Special, Faculty of Health Sciences, McMaster University
2013 - 2016	Assistant Professor, Obstetrics and Gynecology, Special, Faculty of Health Sciences, McMaster University
2010 - 2013	Assistant Professor, Obstetrics and Gynecology, Contractually Limited, Faculty of Health Sciences, McMaster University

Academic

2008 - 2010	Sessional Instructor, McMaster University, Midwifery Education Programme
2006 - 2008	Senior Lecturer, Sheffield Hallam University, U.K. Midwifery Programme
2006 - 2008	Link Lecturer, Clinical Placement Tutor, Sheffield Hallam University, U.K. Midwifery
2004 - 2006	Teaching Assistant, McMaster University, Midwifery Education Programme

Clinical

2003 – present	Midwife, Community Midwives of Hamilton
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Consultations

2014 – present	Clinical Expert for outside Legal Counsel
2012 - present	College of Midwives of Ontario, Clinical Expert, Discipline Review
2011 - present	College of Midwives of Ontario, Consultant Pharmacology Education for Midwives

CAREER INTERRUPTIONS

2016 Aug– 2017 Aug	Parental leave
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SCHOLARLY AND PROFESSIONAL ACTIVITIES

Editorial Boards

2018 – present	Editorial Board Member - Birth
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Personnel Committee

2018	Undergraduate Program Director, Selection Committee, Department of Obstetrics and Gynecology, McMaster University
2018	Postgraduate Program Director, Selection Committee, Department of Obstetrics and Gynecology, McMaster University

Journal Referee

2017 – present	BMC Pregnancy & Childbirth
2009 - present	Canadian Journal of Midwifery Research and Practice
2009 - present	Journal of Obstetrics and Gynaecologists of Canada
2009 - present	Journal of Interprofessional Care

2009 - present Birth
2009 - present British Medical Journal

Conference Abstract Peer Reviewer

2019 – present International Confederation of Midwives
2012 – Present Canadian Association of Midwives
2015 – present Association of Ontario Midwives

External Grant Reviews

2016-present Association of Ontario Midwives Career & Mentored Level Research Grants

AREAS OF INTEREST

Clinical

1. Non-communicable diseases - Diabetes, Obesity, Hypertension
2. Choice of Birthplace
3. Midwifery client experiences of obstetric complications

Research

1. Qualitative research
2. Mixed Methods research

Teaching

1. Interprofessional education
2. Midwifery education
3. Simulation

HONOURS AND AWARDS

2018 Teresa Cascioli Award in Women’s Health
2015 Certificate in Academic Leadership, McMaster Faculty of Health Sciences
2015 Hamilton Health Sciences Early Career Award
2012 Hamilton Health Sciences New Investigator
2012 Alan Blizzard Award, Society for Teaching and Learning in Higher Education
2011 Honourable Mention, Poster Award, Collaborating Across Borders III Conference
2010 Postdoctoral Fellowship, TUTOR-PHC, Canadian Institute for Health Research
2008 Doctoral Fellowship, Social Sciences and Humanities Research Council of Canada
2006 New Faculty Award, Sheffield Hallam University

COURSES TAUGHT

Undergraduate Teaching

Midwifery

2019 Sept – Present Coordinator, Clerkship

2018 Sept – Present Coordinator, Advanced Clinical Skills I
2018 Jan – Present Tutor, Clerkship
2016 Jan – Dec 2018 Tutor, Normal Childbearing
2013 Jul - present Instructor, Teaching Session, Advanced Clinical Skills II
2013 Jul - present Instructor, Teaching Session, Advanced Clinical Skills I
2013 Jul – present Instructor, Teaching Session, Midwifery the Profession
2012 Jul - 2015 May Coordinator, Introduction to Research Methods
2011 Jul - 2015 Dec Coordinator, Clinical Skills for Midwifery Practice
2012 Jul - 2015 May Instructor, Introduction to Research Methods
2010 Jul - 2015 Dec Instructor, Clinical Skills for Midwifery Practice
2013 Jul - 2014 Jun Presenter, Advances in Labour and Risk Management, workshop
2011 Jul - 2012 Jun Instructor, Critical Appraisal

Physician Assistant Education Program

2009 Jul - present Speaker, Large Group Session, Professional Competencies

Undergraduate Medicine

2019 Jan - present Research Elective Supervisor
2011 Jul - present Presenter, Teaching Session, Obstetrics & Gynecology

Graduate Teaching

Health Science Education Masters Program

2019 Jan – present Tutor, Leadership and Management in Health Sciences Education

Postgraduate Teaching

Obstetrics & Gynecology

2016 May - present Assessor, Multi-level Simulation
2011 Jul - present Presenter, Academic Half-Day (Interprofessional Consultation and Collaboration) presented with Val Mueller

Additional Educational Contributions

Additional Teaching

2014 Jun - present Course Co-ordinator, Surgical Assistant in Obstetrics
2012 Jun - present Advances in Labour and Risk Management (ALARM) Instructor
2010 - present Instructor –Nurse Practitioner Program, Overview of Midwifery Care

2010 - present	Instructor – Day in Low Risk Obstetrics, IPE Event, Department of Obstetrics & Gynecology, Medical Students & Midwifery Students
2009 - 2015	Instructor-Pelvic Teaching Certificate Course for Health Professionals, Faculty of Health Sciences Education Services
2009 - 2015	Instructor –Nursing Program, Introduction to Low Risk Maternity Care
2011 - 2012	Instructor – Sociology, Experiential Leadership Course, Leadership in Midwifery
2007 - 2009	Instructor - Midwifery Synthesis Paper
2007 - 2008	Instructor - Clinical Skills for Midwifery Practice
2006 - 2008	Sheffield Hallam University, Midwifery Programme - Senior Lecturer –taught sessions in all courses for the 3 yr. midwifery degree program
2006 - 2008	Sheffield Hallam University, Midwifery Programme - Link Lecturer & Placement Tutor
2005 - 2006	Teaching Assistant - Clinical Skills for Midwifery Practice
2004 - 2006	Teaching Assistant - Midwifery the Profession
2003 – present	Clinical Preceptor – Community Midwives of Hamilton

CONTRIBUTIONS TO TEACHING PRACTICE

Pedagogic Innovation

2015 – present	Lead Author & Editor, Enhanced Interactive E-Textbook Series (suite of 3 books) “Comprehensive Midwifery”
2014 – 2015	Lead Author, Enhanced Interactive E-Textbook “Physical Assessment for the Well Woman and Newborn for primary maternity care providers
2012 - 2014	Co-author Enhanced Interactive E-textbook “Pharmacology Revealed” for primary maternity care providers
2011 - 2015	Co-creator of Consortium Exam Bank Database, Midwifery Education Program

Leadership in Delivery of Educational Programs

2012 - present	Team Lead & Coordinator, Be Health in Pregnancy Research Project information sessions for participants
2014 – 2016	Academic Leadership Program, McMaster Faculty of Health Sciences, Program for Faculty Development
2010 – 2016	Manager of Clinical Supplies and Training, Midwifery Education Program
2007 - 2008	Coordinator (Module Leader), Impact of Health and Social Inequalities, Sheffield Hallam University, U.K.

Course/Curriculum Development

2018 – present	Program Lead, Curriculum Development (e-modules, workshop content and assessment) Point of Care Ultrasound for Primary Maternity Care, Health Science Continuing Education Course
2013 - 2014	Program Lead, Curriculum Development (e-modules, 2 day workshop content and assessment) Surgical Assistant in Obstetrics, Health Science Continuing Education Course

2011 - 2012	Course development MIDWIF F103 Introduction to Research Methods
2011 - 2012	Co-authored "Best Principles of Prescribing" pharmacology educational materials for midwives
2007 - 2008	Curriculum development, Masters in Midwifery, Sheffield Hallam University

Development/Evaluation of Educational Materials

2012 - present	Team Lead, Editor and Evaluation of Enhanced E-books for Midwifery Education
2010 - present	Team Lead, Development and Evaluation of Interprofessional Education in Midwifery Education Program
2010 - present	Team Lead, Development and evaluation of interprofessional Team Observed Structured Clinical Encounter (TOSCE) for maternity care learners
2009 - present	Team Lead, Development and evaluation of a collaborative model of maternity education with Family Medicine Residents and Midwifery students in Niagara Ontario
2006 - 2007	Development and evaluation of curriculum involving service users in midwifery education, Sheffield Hallam University
2006 - 2007	Development and evaluation of simulation in midwifery education, Sheffield Hallam University

SUPERVISORSHIPS

2019 – present	Graduate Student Committee. Lisa Nussey, Health Research Methods Masters Program
2019 – present	Graduate Student Supervisor. Bronte Johnson, Health Science Education Master Program
2019 – present	Thesis Supervisor, HSC 4D06, Praniya Elanganesan
2019 – present	Undergraduate Research Supervisor. Hannah Jonker, Midwifery Student Research Award, \$4500
2019 – present	Undergraduate Medical Student Research Supervisor, Nancy Vu
2017 – present	Graduate Student Committee. Meghan Furnival, Health Science Education Master Program
2017 - 2019	Undergraduate Medical Student Research Supervisor, Giulian Guara
2018 - 2019	Graduate Student Assessor. Emma Seager. Health Science Education Master
2014 - 2017	Graduate Student Supervisor. Christine Sandor. Health Science Education Master Program.
2015 – 2017	Postgraduate Research Supervisor. Kate Gerster. Obstetrics and Gynecology Residency Program
2015 - 2016	Thesis Supervisor, HSC 4A09, Christina New
2015 - 2016	Graduate Student Supervisor. Valerie Mueller. Health Science Education Master Program.
2015 - 2016	Graduate Student Supervisor. Natalie Kirby. Health Science Education Master Program.

2014 - 2016	Undergraduate Research Supervisor. Jennifer McVittie, CIHR Health Professional Student Research Award 2014, \$4251
2013 - 2014	Thesis Supervisor, HSC 4A09, Eric Cheng
2011 - 2012	Undergraduate Research Supervisor. Anya Marion, CIHR Health Professional Student Research Award 2011, \$4200.
2010 - 2011	Inquiry Supervisor, HSC 3H03 Emma Calderone

RESEARCH FUNDING

Grants (Primary Investigator's name is underlined)

2020 Mar – 2021 Mar	<u>Murray-Davis B</u> , Darling EK, Demers, K, Reitsma A, Malott A, Cameron C. Spreading the Alongside Midwifery-led Unit to Strengthen Midwifery Care in Hamilton Ontario." CIHR Spread and Scale Existing Community-Based Innovations, Health Services and Policy Research, Operating Grant, \$65,624.
2020 Jan – 2021 Jan	<u>Murray-Davis B</u> , Hutton, EK, Darling, E, Kaufman, K, Brunton, G, Mattison, C, Banfield, L. Developing a Canadian Strategy to Identify and Prioritize Midwifery Research Capacity and Knowledge Translation. CIHR Institute Community Support, Women Deliver, Institute of Population and Public Health/Gender and Health/Health Services and Policy Research Grant. \$19,368.00.
2020 Jan– 2020 Apr	<u>Brunton, G</u> , <u>Murray-Davis B</u> . Planning for home birth knowledge mobilization: a scoping review and stakeholder consultation. CIHR Institute Community Support, Institute of Population and Public Health, Health Services and Policy Research, Planning and Dissemination Grant, \$14,976.00.
2019 Dec– 2022 Nov	<u>Vanstone, M</u> , Black, M, Darling, E, Lennox, R, McDonald, S, <u>Murray-Davis, B</u> , Patel, T, Shaw, E. Encouraging informed decisions about cannabis use in pregnancy: Educational needs of women and prenatal care providers. CIHR with matched funds from Department of Family Medicine, MERIT, \$243,000.00.
2019 Sep – 2021 Aug	<u>Murray-Davis B</u> , Darling EK, Berger H, Melamed N, Mawjee K, Syed M, Ray JG, Geary M, Barrett J, McDonald SD. Gestational Diabetes Mellitus Screening and Counselling Practices of Antenatal Health Care Providers in Ontario: A mixed methods study. Teresa Cascioli Charitable Foundation Research Award in Women's Health, St. Joesph's Research Institute Award Program. \$81,164.94.
2017 Apr – 2022 Apr	<u>Murray-Davis B</u> , <u>Darling EK</u> (Co-principal Investigators), Cameron C, Hutton EK. Evaluation of an Alongside Midwifery Unit. MOHLTC/Markham Stouffville Hospital \$150,000.
2017 Apr – 2019 Apr	<u>Murray-Davis B</u> , Darling EK, Berger H, Melamed N, Hasan H, Mawjee K, Ray JG, Geary M, Barrett J, and, McDonald S, for DOH-NET (Diabetes, Obesity and Hypertension in Pregnancy Research) and SOON (Southern Ontario Obstetrical Network) Investigators. Gestational Diabetes, Obesity and Hypertension Among Ontario Midwifery Clients: A mixed methods study. Association of Ontario Midwives Career Midwifery Research Grant \$30,528.50.
2017 Apr – 2019 Apr	<u>Darling EK</u> , Vanstone M, Hutton EK, <u>Murray-Davis B</u> , Ahmed R, Nussey L. Exploring equitable access to midwifery care for people of low socio-economic status: facilitators

- and barriers. Association of Ontario Midwives Established Career Midwifery Research Grant. \$40,000.
- 2016 Sept– 2018 Sept Dufour S, Bernard S, Murray-Davis B, Graham N. Establishing and Mobilizing Best Practice Principles for Compromised Abdominal Wall Integrity. MIIETL Teaching & Learning Grant, McMaster University, \$2000.00.
- 2016 May – 2021 May Murray-Davis B, Berger H, Melamed N, (co-principal investigators), Ray J, McDonald S, Geary M, Barrett J. CIHR Clinician Investigator Team Grant. Non-Communicable Diseases in Obstetrics: Improving Quality of Care and Maternal Fetal Outcomes through an Obstetrical Research Network. CIHR \$1,500,000.
- 2016 May – 2012 May Sloboda DM, Atkinson SA, Barker M, Bowdish DME, Braun T, McConnell M, McDonald SD, Moffat CS, Murray-Davis B, Ratcliffe EM, Schertzer JD, Steegers-Theunissen R, Surette MG. Team Grant: DOHaD - Implications for Men, Women, Boys and Girls, HUGS for HEALTH: Healthy Bugs for Healthy Babies DOHaD Team, Canadian Institutes of Health Research, Human Development, Child and Youth Health, \$299,910.00.
- 2015 Jan – 2018 May Murray-Davis B, McDonald S, Hutton E, Atkinson S. Be Health In Pregnancy: Understanding Women’s Perceptions of Nutrition, Exercise and Weight Gain in Pregnancy. Early Career Award, Hamilton Health Sciences, \$150,000.00
- 2015 Dec – 2016 Dec Gerster K, Murray-Davis B, Ebernella SD, Costescu D. Regional Medical Associates Research Scholarship, \$7,500
- 2015 Jan – 2016 Jan Gerster K, Murray-Davis B, Ebernella SD, Costescu D. McMaster Family Planning Grant, \$2,000
- 2013 Sept- 2015 May Murray-Davis B, Hutton E, McDonald H, McNiven P, Wainman B, Teaching Physical Assessment of the Well Women: Development of an Educational Resource for Midwifery Students, McMaster University, \$20,227.00
- 2012 Jan - 2015 Jan Murray-Davis B, McDonald S, Dore S, Marrin M, McDonald H, DeSantos J, Hutton E, Gardosi J, Cross-Sudworth F, Prine K, Leyland N, Using a Standardized Clinical Outcome Review (SCOR) for Improving Patient Safety. New Investigator Fund, Hamilton Health Sciences, \$45,000.00
- 2012 Jan - 2013 Dec Malott A, Symogas D, Murray-Davis B, Derbyshire D, Fahoush O, McQuesten Community Care Maternity Services. Grant, Healthy Communities Fund, Hamilton Community Foundation, \$29,973.00
- 2012 Jan - 2013 Dec Wainman B, McDonald H, Murray-Davis B, Pharmacology Revealed – An Enhanced E-Book for Pharmacology, Grant, Centre for Leadership in Learning Teaching and Learning Grant, McMaster University, \$8,884.00
- 2011 Jan - 2012 Dec Malott A, Symogas D, Murray-Davis B, Derbyshire D, Fahoush O. Hamilton Community Foundation Grants, Hamilton Community Foundation. \$25,000. McQuesten Community Care Maternity Services, \$25,000.00
- 2011 May - 2012 Apr Murray-Davis B, Maternity care interprofessional learning initiative, Centre for Leadership in Learning, McMaster University, \$8,769.00
- 2011 Jan - 2011 Dec Murray-Davis B, Interprofessional Team Observed Structured Clinical Encounter for Learners in Maternity Care, PIPER IPE Pilot Project Research Funding, McMaster University, \$5,745.00
- 2010 Jan - 2011 Dec Murray-Davis B, TUTOR-PHC Postdoctoral Fellowship, Grant, Canadian Institute for Health Research, \$48,000.00

- 2009 Jan - 2010 Dec **Shaw E, Murray-Davis B, Kerley B, Knight S.** A Collaborative Model for Maternity Care Education with Family Medicine Residents and Midwifery Students, Grant, PIPER IPE Pilot Project Research Funding, McMaster University, \$6,000.00
- 2008 Jan - 2009 Dec **Murray-Davis B.** PhD Research, Grant, Doctoral Fellowship, Social Sciences and Humanities Research Council of Canada, \$40,000.00
- 2008 Jan - 2009 Dec **Murray-Davis B.** PhD Research (U.K. £500), Grant, Small Research Grant, Center for Interprofessional E-Learning, Sheffield Hallam University, \$500.00
- 2007 Jan - 2008 Dec **Murray-Davis B, Soltani H, Wilkins H,** Service User Involvement in Midwifery Education, U.K. £4,700, Grant, Innovation in Teaching and Assessment Grant, Sheffield Hallam University, \$4,700.00
- 2006 Jan - 2007 Dec **Murray-Davis B,** New Faculty Award, U.K. £4,500, Grant, Sheffield Hallam University, \$4,500.00

LIFETIME PUBLICATIONS (Principal Author is the first name on each of the entries below)

Books

1. **Murray-Davis B, Hutton EK, Wainman B.** editors. Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence for Practice: Management of Complications Arising during Pregnancy, Birth, Postpartum and Newborn Care. (2019) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>
2. **Murray-Davis B, Hutton EK, Wainman B.** editors. Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence for Practice: Professional Roles. (2018) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>
3. **Murray-Davis B, Hutton EK, Wainman B.** editors. Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence for Practice: Normal Pregnancy, Birth, Postpartum and Newborn Care, 2nd Edition. (2017) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>
4. **Murray-Davis B, McDonald H, McNiven P, Wainman B.** Physical Assessment of the Well Woman and Newborn: An Enhanced E-Book for Midwives. (2014) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>
5. Wainman B, McDonald H, **Murray-Davis B.** Pharmacology Revealed. An e-book for midwives. (2013) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>
6. **Murray-Davis, B.** Interprofessional working in maternity care: how professional relationships influence the experiences of women. (2008) VDM Verlag: Germany.

Chapters in Books

1. Sandor C, **Murray-Davis B.** Vanstone M, Hutton EK. The transition to clinical practice for new registrant midwives in Ontario, Canada. In "Starting Life as a Midwife". Gray M, Kitson-Reynolds E, Cummins A, Editors (2019) Springer Publishing: Melbourne.
2. Murray-Davis B. Antenatal Care. In: **Murray-Davis B, Hutton EK, Wainman B.** editors. Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence for Practice: Normal Pregnancy, Birth, Postpartum and Newborn Care, 2nd Edition. (2017) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>
3. Murray-Davis B. Tests and Investigations. In: **Murray-Davis B, Hutton EK, Wainman B.** editors. Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence for Practice: Normal Pregnancy, Birth, Postpartum and Newborn Care, 2nd Edition. (2017) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>

4. Murray-Davis B. Second Stage of Labour. In: **Murray-Davis B**, Hutton EK, Wainman B. editors. *Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence for Practice: Normal Pregnancy, Birth, Postpartum and Newborn Care*, 2nd Edition. (2017) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>
5. Murray-Davis B. Perineal Care and Repair. In: **Murray-Davis B**, Hutton EK, Wainman B. editors. *Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence for Practice: Normal Pregnancy, Birth, Postpartum and Newborn Care*, 2nd Edition. (2017) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>
6. Murray-Davis B. Postpartum Wellness. In: **Murray-Davis B**, Hutton EK, Wainman B. editors. *Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence for Practice: Normal Pregnancy, Birth, Postpartum and Newborn Care*, 2nd Edition. (2017) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>
7. Murray-Davis B. The Well Newborn. In: **Murray-Davis B**, Hutton EK, Wainman B. editors. *Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence for Practice: Normal Pregnancy, Birth, Postpartum and Newborn Care*, 2nd Edition. (2017) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>
8. Jones J, Murray-Davis B. Infant Feeding. In: **Murray-Davis B**, Hutton EK, Wainman B. editors. *Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence for Practice: Normal Pregnancy, Birth, Postpartum and Newborn Care*, 2nd Edition. (2017) McMaster University: Hamilton. <https://www.radixantiqua.com/product-category/midwifery/>

Peer Reviewed Journal Articles

1. **Murray-Davis B**, Berger H, Melamed N, Hasan H, Mawjee K, Syed M, Ray JG, Geary M, Barrett J, McDonald SD. Gestational weight gain counseling practices among difference antenatal health care providers: a qualitative grounded theory study. *BMC Pregnancy & Childbirth*, 2020; 20(1): 102.
2. Ashwal, E, Saied, S, Melamed, N, Barrett, J, Mawjee, K, **Murray-Davis, B**, McDonald, S.D, Ray, G J. Geary, M, Berger, H. Failed lifestyle modification in GDM—The effect of fasting versus postprandial abnormalities on fetal growth. *American Journal of Obstetrics & Gynecology*, 2020; 222 (1): S257.
3. Ashwal, E, Saied, S, Melamed, N, Barrett, J, Mawjee, K., **Murray-Davis, B**, McDonald, S. D, Ray, GJ, Geary, M, Berger, H. Fetal growth trajectories in Gestational Diabetes Mellitus Pregnancies and Large for Gestational Age at Birth. *American Journal of Obstetrics & Gynecology*, 2020; 222 (1): S102.
4. Ashwal, E, Saied, S., Melamed, N, Barrett, J., Mawjee, K, **Murray-Davis, B**, McDonald, S. D, Ray, GJ, Geary, M, Berger, H. Characteristics of abnormal oral glucose tolerance test in GDM pregnancies and pregnancy outcome. *American Journal of Obstetrics & Gynecology*, 2020; 222 (1): S101.
5. Berger H, Melamed N, **Murray-Davis B**, Hasan H, Mawjee K, Barrett J, McDonald S, Geary M, Ray JG. Impact of Diabetes, Obesity and Hypertension on Preterm Birth: Population-based Study. *PLOS One*, 2020; 15 (3): e0228743.
6. McKerracher L, Barker ME, Moffat C, McDonald S, **Murray-Davis B**, McConnell M, Atkinson S, Sloboda D. Knowledge about DOHaD is independently associated with variation in diet quality during pregnancy. *Maternal & Child Nutrition*, 2020; 16: e12891.
7. Ram, M, Berger, H, Lipworth, H, Geary, M, McDonald, SD, **Murray-Davis, B**, Riddell, C, Hasan, H, Barrett, J, Melamed, N. The relationship between maternal body mass index and pregnancy outcomes in twin compared with singleton pregnancies. *International Journal of Obesity*, 2020; 44(1): 33-44.

8. Darling EK, Grenier L, Nussey L, **Murray-Davis B**, Hutton EK, Vanstone M. Access to midwifery care for people of low socio-economic status: a qualitative descriptive study. *BMC Pregnancy & Childbirth*, 2019; 19 (1): 416-429.
9. Mueller V, Ellis S, **Murray-Davis B**, Sonnadara R, Grierson LEM. A Multiple Trainee, Multiple Level, Multiple Competency (MULTI-TLC) Simulation-based Approach to Training Obstetrical Emergencies. *Perspectives on Medical Education*, 2019; 8(5):309-313.
10. Gerster K, **Murray-Davis B**, Dason S, Costescu D. A Qualitative Exploration of Past Family Planning Counselling Experiences of Adolescent and Young Mothers. *Canadian Journal of Midwifery Research and Practice*, 2019; 18(2): 40-47.
11. Berger, H, Yaniv-Salem, S, **Murray-Davis, B**, Hasan, H, Mawjee, K, Ray, JG, Barrett, J, McDonald, SD, Geary, M, Persaud, M, Reddi, T, Melamed N. A Clinical Model for the Prediction of Diet Controlled GDM. *Journal of Obstetrics and Gynaecology Canada*, 2019; 41(5): 771.
12. **Murray-Davis B**, Grenier L, Atkinson S, Mottola M, Wahoush O, Thabane L, Xie F, Vickers-Manzin J, Moore C, Hutton EK. Experiences regarding nutrition and exercise among women during early postpartum: A qualitative grounded theory study. *BMC Pregnancy and Childbirth*, 2019; 19(368): 2-12
13. Berger H, Melamed N, **Murray-Davis B**, Hasan H, Mawjee K, Barrett J, McDonald SD, Geary M, Ray JG. Prevalence of Pre-Pregnancy Diabetes, Obesity and Hypertension in Canada. *JOGC*, 2019; 41(11):1579-1588.
14. Brown M, Melamed N, **Murray-Davis B**, Hasan H, Mawjee K, Barrett J, McDonald SD, Ray JG, Geary M, Berger H. Timing of Delivery in Women with Pre-Pregnancy Diabetes Mellitus: a population-based study. *BMJ Open Diabetes Research and Care*, 2019; 7(1).
15. **Murray-Davis B**, Berger H, Melamed N, Hasan H, Mawjee K, Syed M, Ray JG, Geary M, Barrett J, McDonald SD. Is type of antenatal care provider, family physician, obstetrician or midwife, associated with excess or inadequate gestational weight gain? A retrospective cohort study. *CMAJ Open*, 2019; 7(2), E283-E293.
16. **Murray-Davis, B**, Berger, H., Melamed, N, Hasan, H, Mawjee, K, Syed, M, Ray, J. G, Geary, M, Barrett, J, & McDonald, S.D. Weight gain during pregnancy: Does the antenatal care provider make a difference? A retrospective cohort study. *CMAJ Open*, 2019; 7(2), E283-E293.
17. Dufour S, Bernard S, **Murray-Davis B**, Graham N. Establishing expert-based recommendations for the conservative management of pregnancy-related diastasis rectus abdominis: results of a Delphi consensus study. *Journal of Women's Health Physical Therapy*. 2019; 43(2): 73-81.
18. Hirsch L, Berger H, Okby R, Ray JG, Geary M, McDonald SD, **Murray-Davis B**, Riddell C, Halperin I, Hasan H, Barrett J, & Melamed N. Gestational Diabetes Mellitus is Associated with Adverse Outcomes in Twin Pregnancies. *American journal of obstetrics and gynecology*, 2019; 220(1), 102-e1.
19. Hirsch L, Berger H, Okby R, Ray JG, Geary M, McDonald SD, **Murray-Davis B**, Riddell C, Halperin I, Hasan H, Barrett J & Melamed, N. Incidence and Risk Factors for Gestational Diabetes Mellitus in Twins Versus Singletons Pregnancies. *Archives of Obstetrics and Gynaecology*. 2018; 298(3):579-87.
20. Ram M, Berger H, Ray JG, Lipworth H, Geary M, McDonald SD, **Murray-Davis B**, Riddell C, Hasan H, Barrett J, & Melamed N. Timing of Delivery in Women with Chronic Hypertension. *Obstetrics and Gynecology*. 2018; 132(3): 669-77.
21. **Murray-Davis B**, McVittie J, Barrett JF, Hutton EK; Twin Birth Study Collaborative Group. Exploring Women's Preferences for the Mode of Delivery in Twin Gestations: Results of the Twin Birth Study. *Birth*. 2016; 43(4): 285-292.
22. Gray M, Malott A, **Murray-Davis B**, Sandor C. A scoping review of how new midwifery practitioners transition to practice in Australia, New Zealand, Canada, United Kingdom and The Netherlands. *Midwifery*. 2016; 42: 74-79.
23. Melamed N, Ray JG, Geary M, Bedard D, Yang C, Sprague A, **Murray-Davis B**, Barrett J, Berger H. Induction of

- labor before 40 weeks is associated with lower rate of cesarean delivery in women with gestational diabetes mellitus. *Am J Obstet Gynecol*. 2016; 214(3): 364.e1-8.
24. **Murray-Davis B**, McDonald H, Cross-Sudworth F, Ahmed R, Thorpe J, Gardosi J, Hutton EK, McDonald S. Implementation of an Interprofessional Team Review of Adverse Events in Obstetrics Using a Standardized Computer Tool. A Mixed Methods Study. *JOGC*. 2016; 38(2): 168-176.
 25. **Murray-Davis B**, McConnell M, Malott AM, Mueller V, Shaw E, Solomon P. Evaluating the impact of the Advances in Labour and Risk Management (ALARM) course on learners perceptions of the own and other's professions. *Canadian Journal of Midwifery Research and Practice*. 2016; 15(2):28-37.
 26. **Murray-Davis B**, McDonald H, Cross-Sudworth F, Ahmed R, Thorpe J, Gardosi J, Hutton EK, McDonald S. Is a Standardized Computer Tool an Effective Strategy for Root Cause Analysis of Adverse Outcomes in Obstetrics? *JOGC*. 2015; 37(8): 728-35.
 27. **Murray-Davis B**, McDonald H, Rietsma A, Coubrough M, Hutton EK. Deciding on Home or Hospital Birth: Results of the Ontario Choice of Birthplace Survey. *Midwifery*. 2014; 30:869-876.
 28. **Murray-Davis B**, Marshall M, Gordon F. Becoming an Interprofessional Practitioner: Factors promoting the application of pre-qualification learning to professional practice in maternity care. *Journal of Interprofessional Care*. 2014; 28(1): 8-14.
 29. **Murray-Davis B**, Solomon P, Marshall D, Malott A, Mueller V, Shaw E, Dore K, Burns S. A Team Observed Structured Clinical Encounter (TOSCE) for pre-licensure learners in maternity care: A short report of the development of an assessment tool. *Journal of Research in Interprofessional Practice and Education*. 2013; 3(10): 124-128.
 30. **Murray-Davis B**, Shaw E, Kerley B, Knight S. A Pilot Project for Collaborative Maternity Education: Understanding Perspectives from Family Medicine and Midwifery. *Canadian Journal of Midwifery Research and Practice*. 2013; 12(3): 22-29.
 31. **Murray-Davis B**, McNiven P, McDonald H, Malott A, Elarar L, Hutton EK. Why home birth? A qualitative study exploring women's decision making about place of birth in two Canadian Provinces. *Midwifery*. 2012; 28: 576-581.
 32. **Murray-Davis B**, Marion A, Malott A, Reitsma A, Hutton EK. Women's experiences of participating in the Early External Cephalic Version 2 (EECV2) Trial. *Birth*. 2012; 39(1): 1-9.
 33. **Murray-Davis B**, Marshall M, Gordon F. From school to work: promoting the application of pre-qualification interprofessional education in the clinical workplace. *Nurse Education in Practice*. 2012; 12(5): 284-88.
 34. **Murray-Davis B**, Marshall M, Gordon F. What do midwives think about interprofessional working and learning? *Midwifery*. 2011; 27(3): 376-381.
 35. Malott AM, **Murray-Davis B**, McDonald H, Hutton E. Midwifery Care in Eight Industrialized Countries: How Does Canadian Midwifery Compare? *Journal of Obstetrics and Gynecology of Canada*. 2009; 31(10): 974-980.
 36. **Murray-Davis B**, Soltani H, Wilkins H. Using a Childbirth Simulator in Midwifery Education. *British Journal of Midwifery*. 2009; 17(4): 234-238.
 37. **Murray-Davis B**. How authoritative texts reinforce the medical model of birth. *British Journal of Midwifery*. 2008; 16(4): 212-217.
 38. **Murray-Davis B**. Women's experiences of consultation: negotiating conflicting models of birth. *Canadian Journal of Midwifery Research and Practice*. 2008; 7(2): 22-30.
 39. **Murray-Davis B**. Optimal timing of cord clamping: a commentary on recent evidence. *Canadian Journal of Midwifery Research and Practice*. 2007; 6(3): 42-43.

PRESENTATIONS AT MEETINGS

Invited Oral Presentation

1. Murray-Davis, B. Experiences of nutrition and exercise during the early postpartum: a qualitative grounded theory study. McMaster Midwifery Research Symposium. Mar 26 2019.

Peer Reviewed Oral Presentations

1. Murray-Davis, B, Syed, M. Gestational Diabetes, Obesity and Hypertension among Ontario Midwifery Clients: A Mixed Methods Study. Oral presentation at the Canadian Association of Midwives, Halifax, NS. October 2019.
2. Yaniv-Salem, S., Melamed, N., Murray-Davis, B., Hasan, H., Ray, J.G., Barrett, J., McDonald, S.D., Geary, M., Persaud, M., Reddi, T., Berger, H. A Clinical Model for the Prediction of Diet Controlled GDM. SOGC Annual Clinical and Scientific Conference, Halifax, NS. June 2019.
3. Guarna, G., Murray-Davis, B., Berger, H., Melamed, N., Syed, M., Mawjee, K., Barrett, J., Ray, J.G., Geary, M., McDonald, S.D. Diabetes, obesity and hypertension in midwifery-led care. Oral presentation at the McMaster Midwifery Research Symposium, Hamilton, ON. March 2019.
4. Murray-Davis, B., Berger, H., Melamed, N., Mawjee, K., Syed, M., Ray, J. G., Geary, M., Barrett, J. & McDonald, S.D. (2019, May). Are there differences in counseling practices between antenatal health care providers regarding gestational weight gain? Oral presentation at the Association of Ontario Midwives Conference, Markham, ON, May 2019.
5. Murray-Davis B, Berger H, Melamed N, Mawjee K, Syed M, Ray JG, Geary M, Barrett J, McDonald SD. Are there differences in counseling practices between antenatal health care providers regarding gestational weight gain? Association of Ontario Midwives Research Symposium, November 2018.
6. Columbus L, Banner H, Mueller V, Ellis S, Donnery C, Dore K, Murray-Davis B. Interprofessional perinatal simulation as a teaching tool for trainees in obstetrics and midwifery: a pilot project. Association of Ontario Midwives Research Symposium, November 2018.
7. Murray-Davis B, Berger H, Melamed N, Hasan H, Mawjee K, Syed M, Ray JG, Geary M, Barrett J, McDonald SD. Gestational Diabetes, Obesity and Hypertension Among Ontario Midwifery Clients. Canadian Association of Midwives Conference, October 2018.
8. Murray-Davis B, Atkinson S. McDonald SD, BHIP study team. Best practices for being healthy in postpartum: A qualitative study of beliefs and behaviours that promote healthy nutrition and exercise for new moms. Association of Ontario Midwives Conference, May 2018.
9. Gerster K, Murray-Davis B, Ebernella SD, Costescu D. A Qualitative Exploration of Past Family Planning Counselling of Adolescent and Young Mothers. North American Society for Pediatric and Adolescent Gynecology, April 2018.
10. Ram M, Berger H, Ray JG, Lipworth H, Geary M, McDonald SD, Murray-Davis B, Riddell C, Hasan H, Barrett J & Melamed N. Gestational Weight Gain in Twin Pregnancies Modeled as a Function of Gestational Age and Pre-Pregnancy Body Mass Index. Oral presentation at the Canadian National Perinatal Research Meeting, February 2018.
11. Berger H, Melamed N, Murray-Davis B, Ray J, McDonald S, Geary M, Barrett J. Non-communicable Diseases and the Risk of Hypertensive Disorders in Pregnancy. Society for Maternal Fetal Medicine Annual Meeting, January 2018.
12. Berger H, Melamed N, Murray-Davis B, Ray J, McDonald S, Geary M, Barrett J. The Relationship Between Maternal Body Mass Index and Pregnancy Outcomes in Twin Pregnancies. Society for Maternal Fetal Medicine Annual Meeting, January 2018.

13. Ram, M, Berger H, Melamed N, Murray-Davis B, Ray J, McDonald S, Geary M, Barrett J. Timing of Delivery in Women with Pre-existing Hypertension. Society for Maternal Fetal Medicine Annual Meeting, January 2018.
14. Berger H, Melamed N, Murray-Davis B, Ray J, McDonald S, Geary M, Barrett J. Is Gestational Diabetes Associated with Adverse Pregnancy Outcome in Women with Twin Pregnancies? Society for Maternal Fetal Medicine Annual Meeting, January 2018.
15. Banner H, Columbus L, Mueller V, Donnery C, Dore K, Murray-Davis B, and Ellis S. Interprofessional Perinatal Simulation as a Teaching Tool for Trainees in Obstetrics and Midwifery. Association of Academic Professionals in Obstetrics and Gynaecology, December 2017.
16. Gerster K, Murray-Davis B, Ebernella SD, Costescu D. A Qualitative Exploration of Past Family Planning Counselling of Adolescent and Young Mothers. Association of Academic Professionals in Obstetrics and Gynaecology, December 2017.
17. Mueller V, Ellis S, Murray-Davis B, Sonnadara R, Grierson LEM. Improving the efficiency and effectiveness of a simulation program to meet the demands of CBD: The use of a Multi-level, Multi-learner, Multi-Competency approach. ICRE October 2017.
18. Dufour S, Bernard S, Murray-Davis B, Graham N. Establishing best practice principles for the conservative management of pregnancy-related diastasis rectus abdominis: results from Phase 1 of a consensus study, International Continence Society Annual Conference, September 2017.
19. Gilbert J, MacDonald T, Dimitrova SB, Murray-Davis B. Home, Hospital or Birth Centre: What Ontario Midwifery Clients Want to Know about Choice of Birthplace. International Confederation of Midwives Conference, June 2017.
20. Gray M, Sandor C, Murray-Davis B, Kitson-Reynolds E, Jong EF, Kool L, Dixon L. Transition to Practice Programmes in New Zealand, Australia, Canada, United Kingdom and the Netherlands. International Confederation of Midwives Conference, June 2017.
21. Banner H, Columbus L, Mueller V, Donnery C, Dore K, Murray-Davis B, and Ellis S. Interprofessional Perinatal Simulation as a Teaching Tool for Trainees in Obstetrics and Midwifery: A Pilot Project. Faculty of Health Sciences Geoffrey Norman Day in Education Research. Ontario. June 2017.
22. Beth Murray-Davis. Exploring Women's Preferences for Mode of Delivery in Twin Gestations: Results of the Twin Birth Study. Association of Ontario Midwives Annual Conference, May 2016.
23. Hutton EK, Murray-Davis B. Out of Hospital Birth — CMAJ or NEJM: What should we believe? Regional Grand Rounds, April 2016.
24. Murray-Davis B. Murray-Davis B, Reitsma A. Choosing where to give birth. The results of the Ontario choice of birthplace study. BORN Provincial rounds (webinar), April 2016.
25. Murray-Davis B, McDonald H. Tiny Perfect Baby. Association of Ontario Midwives Webinar, February 2016.
26. Murray-Davis B, Hutton E course coordinators. Surgical Assist for Obstetrics. Pre-Conference workshop. Society of Obstetricians and Gynecologists of Canada Conference, June 2015.
27. Stobbe K, Murray-Davis B, Pearce-Kelly T. How to assist with a C-Section. Society of Rural and Remote Physicians of Canada. Annual Rural and Remote Medicine Course, April 2015.
28. Murray-Davis B, Cross-Sudworth F, McDonald H, McDonald S, Dore S, Hutton EK, Gardosi J. Using a Standardized Clinical Outcome Review (SCOR) Tool for Improving Patient Safety: A pilot project. International Confederation of Midwives Conference, June 2014.
29. Murray-Davis B, Hutton E course coordinators. Surgical Assist for Obstetrics. Pre-Conference workshop. Society of Obstetricians and Gynecologists of Canada Conference, June 2014.

30. Murray-Davis B, McDonald H. Pre-Conference workshop. Antibiotics and the Midwife Revisited. Association of Ontario Midwives Conference, May 2014.
31. Murray-Davis B, Solomon P, Marshall D, Malott A, Patel T, Mueller V, Shaw E, Dore K. A team observed structured clinical encounter (TOSCE) for learners in maternity care: An innovative, simulated approach to assessing teamwork. European Association of Midwives Educators Conference, November 2013.
32. Murray-Davis B, Cross-Sudworth F, McDonald H, McDonald S, Dore S, Hutton EK, Gardosi J. Developing a Standardized Clinical Outcome Review (SCOR) Tool for Improving Patient Safety: A pilot project. Canadian Association of Midwives Conference, November 2013.
33. Murray-Davis B, McDonald H, Reitsma A. Choosing home or hospital: the findings from the Ontario choice of birthplace study. Canadian Association of Midwives Annual Conference, October 2012.
34. Murray-Davis B, Solomon P, Marshall D, Malott A, Patel T, Mueller V, Shaw E, Dore K. A team observed structured clinical encounter (TOSCE) for learners in maternity care: A pilot project. All Together Better Health Conference, October 2012.
35. McDonald H, Murray-Davis B, Wilson-Mitchell, K. Best practices for midwifery prescribing. Canadian Association of Midwives Annual Conference, November 2011.
36. Shaw E, Murray-Davis B, Kerley B, Knight S. A collaborative model of maternity education with Family Medicine Residents and Midwifery students. NAPCRG Annual Meeting, November 2011.
37. Marshall D, Murray-Davis B, Solomon P, Malott A, Shaw E, Dore K, Mueller V. The Team Observed Structured Clinical Encounter (TOSCE) for maternity care: A workshop demonstrating its use as an assessment tool for teaching and learning. Collaborating Across Borders III Conference, November 2011.
38. Kaufman K, Myers S, Vedam S, Van Wagner V, Myers-Ciecko J, Murray-Davis B. The Midwife and the Professor: Panel Discussion. Canadian Association of Midwives and Midwives Association of North America Joint Conference November 2011.
39. McDonald H, Murray-Davis B, Wilson-Mitchell, K. Best practices for midwifery prescribing. Association of Ontario Midwives Annual Conference, May 2011.
40. Murray-Davis, B. Exploring How IPE Training Influences Future Professional Practice: A Qualitative Study. Ontario IPE 2011 Conference, January 2011.
41. Murray-Davis B, Hutton EK, McDonald H, Malott A, McNiven P. Why Do Women Choose Home Birth? Canadian Association of Midwives Conference, October 2010.
42. Murray-Davis B, Hutton EK, McDonald H, Malott A, McNiven P. Keeping Homebirth Safe: Screening Criteria Used by Midwives. Canadian Association of Midwives Conference, October 2010.
43. Murray-Davis B. Promoting Application of Pre-Qualification IPE in Practice. Collaborating Across Borders II, May 2009.
44. Murray-Davis B. Does Interprofessional Education Prepare Midwives for the Realities of Professional Practice. International Confederation of Midwives, June 2008.
45. Murray-Davis B. Does Interprofessional Education Prepare Midwives for Professional Practice? International Confederation of Midwives, June 2008.
46. Soltani H, Murray-Davis B, Wilkins H. Evaluation of the Birthing Manikin in Midwifery Education. International Confederation of Midwives, June 2008.

Poster Presentations

1. Ashwal, E, Saied, S., Melamed, N, Barrett, J., Mawjee, K, Murray-Davis, B, McDonald, S. D, Ray, GJ, Geary, M, Berger, H. Characteristics of abnormal oral glucose tolerance test in GDM pregnancies and pregnancy outcome. Society of Maternal Fetal Medicine Annual Conference, Grapevine, Texas, February 2020.
2. Ashwal, E, Saied, S, Melamed, N, Barrett, J, Mawjee, K, Murray-Davis, B, McDonald, S.D, Ray, G J, Geary, M, Berger, H. Failed lifestyle modification in GDM—The effect of fasting versus postprandial abnormalities on fetal growth. Society of Maternal Fetal Medicine Annual Conference, Grapevine, Texas, February 2020.
3. Ashwal, E, Saied, S, Melamed, N, Barrett, J, Mawjee, K., Murray-Davis, B, McDonald, S. D, Ray, GJ, Geary, M, Berger, H. Fetal growth trajectories in Gestational Diabetes Mellitus Pregnancies and Large for Gestational Age at Birth. Society of Maternal Fetal Medicine Annual Conference 2020, Grapevine, Texas, February 2020.
4. Guarna, G, Murray-Davis, B, Berger, H, Melamed, N, Syed, M, Mawjee, K, Barrett, J, Ray, JG, Geary, M, McDonald, S.D. Diabetes, obesity and hypertension in midwifery-led care. McMaster Medical Student Research Day, Hamilton, ON, April 2019.
5. Murray-Davis, B., Berger, H., Melamed, N., Hasan, H., Mawjee, K., Syed, M., Ray, JG, Geary, M., Barrett, J, & McDonald, SD. Are there differences in counselling practices between antenatal health care providers regarding gestational weight gain? Canadian National Perinatal Research Meeting, February 2019.
6. Yaniv-Salem, S, Melamed, N, Murray-Davis, B, Hasan, H, Ray, JG, Barrett, J, McDonald, SD, Geary, M, Persaud, M, Reddi, T, Berger, H. A Clinical Model for the Prediction of Diet Controlled GDM. Canadian National Perinatal Research Meeting, February 2019.
7. Brown M, Melamed N. Murray-Davis B, Hasan H, Mawjee K, Barrett J, McDonald SD, Ray JG, Geary M. & Berger H. Timing of Delivery in Women with Pre-existing Diabetes. Society of Obstetricians and Gynecologists of Canada Annual Clinical and Scientific Conference, June 2018.
8. Murray-Davis B, Berger H, Melamed N, Hasan H, Mawjee K, Ray, JG, Geary M, Barrett J. & McDonald SD. The Impact of Antenatal Health Care Providers on Gestational Weight Gain Related Outcomes. Canadian National Perinatal Research Meeting, February 2018.
9. Berger H, Melamed N, Murray-Davis B, Hasan H, Mawjee K, Barrett J, Geary M, McDonald SD, & Ray JG. The DOH is rising. Canadian National Perinatal Research Meeting. February 2018.
10. Berger H, Melamed N, Murray-Davis B, Hasan H, Mawjee K, Barrett J, Geary M, McDonald SD, & Ray JG. The Impact of Pre-Pregnancy Diabetes, Obesity and Hypertension on Preterm Birth. Canadian National Perinatal Research Meeting. February 2018.
11. Berger H, Melamed N, Murray-Davis B, Hasan H, Mawjee K, Barrett J, Geary M, McDonald SD, & Ray JG. Non-communicable Diseases and the Risk of Hypertensive Disorders of Pregnancy. Canadian National Perinatal Research Meeting. February 2018.
12. Ram M, Berger H, Ray JG, Lipworth H, Geary M, McDonald SD, Murray-Davis B, Riddell C, Hasan H, Barrett J & Melamed N. The relationship between maternal body mass index and pregnancy outcomes in twin pregnancies. Canadian National Perinatal Research Meeting, February 2018.
13. Ram M, Berger H, Ray JG, Lipworth H, Geary M, McDonald SD, Murray-Davis B, Riddell C, Hasan H, Barrett J & Melamed, N. Timing of Delivery in Women with Preexisting Hypertension. Canadian National Perinatal Research Meeting, February 2018.
14. Ram M, Berger H, Ray JG, Lipworth H, Geary M, McDonald SD, Murray-Davis B, Riddell C, Hasan H, Barrett J & Melamed N. Optimal Gestational Weight Gain in Twin Pregnancies. Canadian National Perinatal Research Meeting, February 2018.

15. Berger H, Melamed N, Murray-Davis B, Hasan H, Mawjee K, Barrett J, Geary M, McDonald SD & Ray JG. Non-communicable Diseases and the Risk of Hypertensive Disorders of pregnancy. Society of Maternal Fetal Medicine, January 2018
16. Ram M, Berger H, Ray JG, Lipworth H, Geary M, McDonald SD, Murray-Davis B, Riddell C, Hasan H, Barrett J & Melamed, N. The relationship between maternal body mass index and pregnancy outcomes in twin pregnancies. Poster session presented at the meeting of the Society of Maternal Fetal Medicine, January 2018.
17. Ram M, Berger H, Ray JG, Lipworth H, Geary M, McDonald SD, Murray-Davis B, Riddell C, Hasan H, Barrett J & Melamed N. Timing of Delivery in Women with Preexisting Hypertension. Poster session presented at the meeting of the Society of Maternal Fetal Medicine, January 2018.
18. Ram M, Berger H, Ray JG, Lipworth H, Geary M, McDonald SD, Murray-Davis B, Riddell C, Hasan H, Barrett J & Melamed N. Gestational Weight Gain in Twin Pregnancies Modeled as a Function of Gestational Age and Pre-Pregnancy Body Mass Index. Poster session presented at the meeting of the Society of Maternal Fetal Medicine, January 2018.
19. Hirsch L, Berger H, Okby R, Ray JG, Geary M, McDonald SD, Murray-Davis B, Riddell C, Halperin I, Hasan H, Barrett J & Melamed N. Is Gestational Diabetes Associated with Adverse Pregnancy Outcome in Women with Twin Pregnancies? Poster session presented at the meeting of the Society of Maternal Fetal Medicine, January 2018.
20. Banner H, Columbus L, Mueller V, Donnery C, Dore K, Murray-Davis B, and Ellis S. Interprofessional Perinatal Simulation as a Teaching Tool for Trainees in Obstetrics and Midwifery: A Pilot Project. Royal College of Physicians and Surgeons of Canada Simulation Summit. November 2017.
21. Murray-Davis B, Cross-Sudworth F, McDonald H, Dore S, Marrin M, Sabatino L, DeSantis J, DeFrance B, Gardosi J, Hutton E, McDonald S. Does the Use of the SCOR Computer Application Provide a Feasible, Acceptable, and Reliable Strategy for Improving Patient Safety for Mothers and Newborns? International Confederation of Midwives Conference, June 2017.
22. Sandor C, Murray-Davis B, Hutton E, Vanstone M. From Student to Clinician: The Transition to Clinical Practice for New Registrant Midwives in Ontario. International Confederation of Midwives Conference, June 2017.
23. Banner H, Columbus L, Mueller V, Donnery C, Dore K, Murray-Davis B, and Ellis S. Interprofessional Perinatal Simulation as a Teaching Tool for Trainees in Obstetrics and Midwifery: A Pilot Project. SOGC Annual Clinical and Scientific Conference, June 2017 (accepted as a "Best of Three" presentation).
24. Sandor C, Murray-Davis B, Hutton E, Vanstone M. The Ontario New Registrant Study: How do New Registrants Navigate the Transition from Student to Clinician in the First Year of Clinical Practice? Association of Ontario Midwives Annual Conference, May 2016.
25. Murray-Davis B, New C, Atkinson S, Hutton E, BHIP Research Team. Be Healthy In Pregnancy : Women's Experiences of Nutrition, Exercise and Weight Gain Postpartum. Association of Ontario Midwives Annual Conference, May 2016.
26. Murray-Davis, B, Solomon, P, Marshall, D, Malott, A, Shaw, E, Dore, K, Mueller, V. tructured clinical encounter (TOSCE) for learners in maternity care: A pilot project. Collaborating Across Borders III Conference, November 2011.
27. Shaw, E, Murray-Davis, B, Kerley, B, Knight, S. A collaborative model of maternity education with Family Medicine Residents and Midwifery students. Collaborating Across Borders III Conference, November 2011.
28. Murray-Davis, B. From school to work: promoting the application of pre-qualification IPE in the clinical workplace. Collaborating Across Borders III Conference, November 2011.

29. Shaw, E, Murray-Davis, B, Kerley, B, Knight, S. A Collaborative Model for Maternity Care Education with Family Medicine Residents and Midwifery Students. Ontario IPE 2011 Conference, January 2011.
30. Murray-Davis, B. Midwives and Interprofessional Education. Canadian Association of Midwives Conference, November 12-14 2008.
31. Murray-Davis, B. Closing the Theory/Practice Gap: Ensuring Interprofessional Education Prepares Midwives for the Realities of Professional Practice. Trinity College School of Nursing and Midwifery Research Conference, November 2008.
32. Murray-Davis, B. Midwives Perspectives on the Transfer of Interprofessional Education to Professional Practice. Centre for Excellence in Professional Placement Learning Conference, Rethinking Interprofessional Education, October 2007.
33. Murray-Davis, B. Does Interprofessional Education Prepare Midwives for the Realities of Professional Practice? Ontario Interprofessional Education Conference, January 2008.

PATENTS AND COPYRIGHTS

2011 Best Principles for Midwifery Prescribing, Monograph, College of Midwives of Ontario

ADMINISTRATIVE RESPONSIBILITIES

Division/Department

2018-2019 Member, Residency Program Director, Selection Committee

2018-2019 Member, Undergraduate Program Director, Selection Committee

2015 – present Lead, Admissions, Midwifery Education Program, McMaster University

2015 – present Member, Academic Department Education Committee, Department of Obstetrics and Gynecology, McMaster University

2012 - present Member, Academic Department Business Committee, Department of Obstetrics and Gynecology, McMaster University

2011 - 2015 Member, Exam Bank Taskforce, Midwifery Education Consortium

2009 - present Member, Midwifery Consortium Faculty Council, McMaster University, Midwifery Education Program

2009 - present Member, Course Coordinators Committee Midwifery Consortium, Midwifery Education Consortium

2010 - 2011 Member, Interprofessional Clinical Skills Curriculum Committee, McMaster University, Midwifery Education Program

External

2019 - present Member, Home Birth Evidence Review Expert Panel, Canadian Association of Midwives

2015 – present Chair, Midwifery Research Working Group, Association of Ontario Midwives

2015 – present Member, Home birth research advisory group, Association of Ontario Midwives

2014 – present Member, Maternal Newborn Advisory Committee, Provincial Council for Maternal Child Health

2014 - 2016 Member, Education Innovation Committee, Association of Professors of Obstetrics and Gynaecology

- 2012 - 2014 Member, Registered Midwife Advisory Council, Society of Obstetricians and Gynaecologists of Canada
- 2011 – 2016 Member, Policy and Strategic Initiatives Committee, Association of Ontario Midwives
- 2007 - 2008 Member, Task Force for Management of the At Risk Midwifery Student, Midwifery Program, Sheffield Hallam University
- 2006 - 2008 Member, Midwifery Team Co-coordinator, Service User Involvement in Teaching and Assessment, Midwifery Program, Sheffield Hallam University
- 2006 - 2008 Chair, E-Learning in Midwifery Education, Midwifery Program, Sheffield Hallam University
- 2006 - 2008 Member, Development Team for Masters of Midwifery, Midwifery Program, Sheffield Hallam University
- 2006 - 2008 Chair, Curriculum and Professional Issues Committee, Midwifery Program, Sheffield Hallam University
- 2006 - 2008 Member, Interprofessional Conference Planning Committee, Faculty of Health and Wellbeing, Sheffield Hallam University

Faculty

- 2013 - 2016 Member, Valedictorian Selection Committee, McMaster University, Faculty of Health Sciences
- 2012 - 2016 Member, Center for Simulation Based Learning Advisory Council, McMaster University, Faculty of Health Sciences
- 2012 - 2016 Member, Program for Interprofessional Education and Research Advisory Council, McMaster University, Faculty of Health Sciences
- 2011 - 2016 Member, Faculty of Health Sciences Interprofessional Education Student Conference Planning Committee, McMaster University, PIPER
- 2010 - 2016 Member, Learning Technologies Advisory Council, McMaster University, Faculty of Health Sciences
- 2012 - 2013 Member, Health Sciences Education Council Retreat Planning Committee, McMaster University, Faculty of Health Sciences

Hospital

- 2019 – present Midwifery steering group for development of Alongside Midwifery Unit
- 2010 - 2015 Member, Joint Obstetrics and Neonatal Care Committee, Hamilton Health Sciences, Department of Obstetrics
- 2010 - 2012 Non-elected member of Council, Preparation Taskforce of Educational Materials for Midwives, College of Midwives of Ontario
- 2005 - 2006 Member, Neonatal Quality Assurance Committee, Hamilton Health Sciences, Department of Paediatrics
- 2004 - 2006 Member, Obstetric Practice Committee, Hamilton Health Sciences, Department of Obstetrics
- 2003 - 2006 Member, Task Force for Management of Postdates Inductions, Hamilton Health Sciences, Department of Obstetrics

A. NAME: **DOROTHY ANNE MARGARET MALOTT**

B. HOME ADDRESS: 2638 Bluffs Way
Burlington, Ontario, L7M0T8
289 337 4697

C. BUSINESS ADDRESS: McMaster University, Midwifery Education Program
McMaster University, 1280 Main St. West 4H24D
Hamilton, ON L8S 4K1
Tel: 905-525-9140, Ext. 26654
Fax: 905-523-6459

D. EDUCATION:

1987 Bachelor of Science in Nursing (BScN)
Diploma of Public Health Nursing (DPHN)
University of Windsor
401 Sunset Blvd., Windsor, Ontario N9B 3A8

1993 Master of Science in Nursing (MScN)
Nurse Midwifery with Education Career Option
Frances Payne Bolton School of Nursing
Case Western Reserve University
10900 Euclid Ave., Cleveland, Ohio 44106

2017 Doctor of Philosophy (PhD)
Faculty of Health Sciences, Health Promotion
Western University
1151 Richmond St., London, Ontario N6A 3K7

E. CURRENT STATUS:

Academic Appointments

Associate Professor, Department of Family Medicine
Midwifery Education Program, McMaster University, Special Category

Fellow, McMaster Midwifery Research Centre

Supervisory Faculty, Faculty of Health Sciences
Health Sciences Education Master of Science Program, McMaster University

F. PROFESSIONAL ORGANIZATIONS:

1997-present	College of Midwives of Ontario	Member
1997-present	Association of Ontario Midwives	Member
1997-present	Canadian Association of Midwives	Member
2003-present	Canadian Association of Midwifery Educators	Member
2006-present	Society of Obstetrics and Gynecologists of Canada	Member

G. EMPLOYMENT HISTORY:

Academic

1995-present	McMaster University Midwifery Education Program 3001 Michael DeGroot Centre for Learning Hamilton, Ontario Teaching Assistant/Instructor/Course Coordinator/Assistant Professor/Associate Professor
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Clinical

2018-present	Hospitalist Midwife, Midwifery Clinical Educator Alongside Midwifery Unit, Markham Stouffville Hospital 381 Church St Markham, Ontario L3P 7P3
2017-2018	Practicing Midwife Community Midwives of Halton 3075 Hospital Gate Suite # 322 Oakville, Ontario L6M 1M1
1997-2017	Senior Partner and Practicing Midwife Community Midwives of Hamilton 356 Main St. W Hamilton, Ontario L8P 1K2
1994-1997	Staff Nurse, Childbirth Educator Labour & Delivery, Hamilton Health Sciences Corporation 1200 Main St W Hamilton, Ontario L8N 3Z5
1993-1994	Certified Nurse-Midwife Planned Parenthood of Greater Cleveland 3135 Euclid Avenue, Suite 102 Cleveland, Ohio 44115

H. AREAS OF INTEREST:

Research and Clinical

- Implementing and evaluating interprofessional models of care maternity care.
- Implementing and evaluating interprofessional education.
- Evaluating sustainability of midwifery as a profession.

Implementing and evaluating evidenced based practice in midwifery care.
Exploring the role of midwifery in community engagement.

Education

Ongoing development, evaluation and revision of the midwifery education program in general with specific interest in implementing and evaluating inter professional education.

Development and evaluation of interactive web-based clinical courses.

I. HONOURS AND AWARDS:

1991-1993	Nurse Trainee Scholarship
1991-1993	Sigma Theta Tau (3.95 GPA)
2007	Best Poster Award. Association of Professors of Obstetrics and Gynecology of Canada
2008	Basic Educational Skills Teacher's certificate Level I Program for Faculty Development Academic Pathways Faculty of Health Sciences, McMaster University
2012-2016	Ontario Graduate Scholarship (OGS)
2012	Alan Blizzard Award (Society for Teaching and Learning in Higher Education (STLHE) for contribution to interprofessional education

J. SUPERVISORSHIP:

2019-present	PhD	Thesis committee member
2019-present	MHEd	Thesis committee member
2017-present	MHEd	Thesis Advisor
2017-2019	MHEd	Curriculum Project Advisor
2012-2013	BHSc Inquiry Advisor	HTH SCI 3H03
2007-2010	Faculty Advisor	CHIME (Community Health Initiative with McMaster Education)
2003-2007	Clinical Preceptor	MWI, MWII, MWIII
2003-2007	Clinical Co-preceptor	MWIII, MWIV, Clerkship
2002-2003	BHSc Inquiry Advisor	HTH SCI 3H03
2002-2006	Midwifery Synthesis Paper Advisor	MIDWIF 3F03 (3-4 papers per year)
2000-2011	Clinical Mentor	Professional New Registrant

K. RESEARCH / GRANTS

Malott AM, Murray Davis B, Seager E, Demers K. Standardizing formative evaluation in midwifery clinical education. MacPherson Institute Teaching and Learning grant. (PI) (2020-2021) \$3,6060.75
MacPherson Institute.

Malott AM, Semogas, D., Derbyshire, D., Valitis, R., Wahoosh, O. Community Care Maternity Services: A Pilot Project in the McQuesten Community. Hamilton Community Foundation- Community Health and Education Research grant. Hamilton Community Foundation (PI) (2011-2012) \$25,000 (Total budget \$270,050) and Healthy Communities Fund, Ministry of Tourism, Culture and Sport \$27,695

Valitis, R., Wahoosh, O., Derbyshire, D., **Malott, A.**, Rolfe, S., Semogas, D. Street smarts book smarts: evaluation of a knowledge exchange intervention (health in the hubs phase 2). Community Health and Education Research Fund, Hamilton Community Foundation. (Co-I) (2011-2012) \$19,700 (total budget of \$35,553)

Murray-Davis, B., Solomon, P., Mueller, V., **Malott, A.** Centre for Leadership in Learning- Teaching and Learning grant. McMaster University. (Co-I) (2011) \$8,769

Malott AM., Vineberg R, Midwifery Student Preparation for International Placements: A Pilot Project. Canadian Institute of Health Research – Health Professional Student Research Awards. McMaster University, Faculty of Health Sciences (PI) (2011) \$4,251

Murray-Davis, B., Solomon, P., Marshall, D., **Malott, A.**, Mueller, V. Shaw, L. Interprofessional team observed structured clinical encounter (TOSCE) for learners in maternity care. Program for Interprofessional Practice, Education and Research (PIPER) IPE Pilot Project grant (Co-I) (2010) \$5,745

Malott AM. Creating and Evaluating a Web based Midwifery Course. Center for Leadership in Learning- Learning Innovations grant. McMaster University (PI) (2010) \$800

Malott AM. Evaluating Interprofessional Learning Among Trainees of Obstetrical Care. Program for Inter Professional Practice, Education and Research (PIPER)-Inter Professional Education grant. McMaster University CSD Award # 2008H00148 (PI) (2007) \$3,500

The Early Cephalic Version 2 Trial: Site Investigator: **Malott AM.**
(2007-2009)
Role: Site Investigator, Hamilton and surrounding area
Principal Investigator: Eileen Hutton
CIHR funded \$2.8 M

The Early Cephalic Version Trial
1999-2002
Centre Coordinator, Hamilton and surrounding area: **Malott AM.**
Principal Investigator: Eileen Hutton
CIHR funded \$2.8 M

L. LIFETIME PUBLICATIONS:

Chapters

Malott, A.M. Section Editor. Complications in Labour and birth. In *Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence of Practice* Hutton, E.K. & Murray-Davis, B. Eds

Malott, A.M., Darling, E. Third stage management. In *Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence of Practice* Hutton, E.K. & Murray-Davis, B. Eds.

Malott, A.M. Postpartum Complications. In *Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence of Practice* Hutton, E.K. & Murray-Davis, B. Eds

Malott, A.M. Induction of Labour. In *Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence of Practice* Hutton, E.K. & Murray-Davis, B. Eds

i) Peer Reviewed

Journal Articles

Cameron C, Sassi J, **Malott AM** (2019). The Markham Stouffville Hospital Alongside Midwifery Unit: A Centre for Excellence for Normal Birth. *CJMRP*, 19(1):43-52.

Stoll K, Downe S, Edmonds J, McAra-Cooper, Mechthild, G, Sadler, M and Thomson, Gillian, **Malott AM** (2019). A survey of university students' preferences for midwifery care and community birth options in eight high-income countries. *Journal of Midwifery & Women's Health*. ISSN 1526-9523 <https://onlinelibrary.wiley.com/journal/15422011>

Stoll K, Edmonds J, Sadler M, Thomson G, McAra-Couper J, Swift E, **Malott AM**, Streffing J, Gross M, Downe S, the ICAPP Study Team (2018). A cross-country survey of attitudes toward childbirth technologies and interventions among university students. *Women and Birth*. <https://doi.org/10.1016/j.wombi.2018.07.025>

Stoll K, Hauk Y, Downe S, Edmonds J, Gross G, **Malott AM**, McNiven P, Swift E, Thomson G, Hall W. (2016). Cross-cultural development and psychometric evaluation of a measure to assess fear of childbirth prior to pregnancy. *Sexual & Reproductive Healthcare*. June (8), 49–54. <http://dx.doi.org/10.1016/j.srhc.2016.02.004>

Gray M, **Malott AM**, Murray-Davis B, Sandor C. (2016). A scoping review of how new midwifery practitioners' transition to practice in Australia, New Zealand, Canada, United Kingdom and The Netherlands. (In press, accepted manuscript). *Midwifery*, Nov (42):74-79. [https://www.midwiferyjournal.com/article/S0266-6138\(16\)30174-7/abstract](https://www.midwiferyjournal.com/article/S0266-6138(16)30174-7/abstract). DOI: <https://doi.org/10.1016/j.midw.2016.09.018>

Murray Davis B, McConnell M, **Malott AM**, Mueller V, Shaw E & Solomon P (2016). The impact of the Advances in Labour and Risk Management [ALARM] course on learners' perceptions of their own and others' professions. *CJMRP*, 15(2): 28-37.

Jung B, Salfi J, Konigsberg E, **Malott AM** (2013). Complementary and alternative modalities: Expanding boundaries for interprofessional education. *JIPC*, 27,13-14.

Malott AM, Kaufman K, Thorpe J, Saxell L, Becker G, Paulette L, Ashe A, Martin K, Yeates L, Hutton EK. (2012). Models of organization of maternity care by midwives in Canada: a descriptive review. *JOGC*, 34(10):961-970.

Murray-Davis B, McNiven P, McDonald H, **Malott A**, Elarar L, Hutton EK. (2012). Why home birth? A qualitative study exploring women's decision making about place of birth in two Canadian provinces. *Midwifery*, 28(5):576-81.

<https://www.ncbi.nlm.nih.gov/pubmed/22889685>

doi:10.1016/j.midw.2012.01.013

Murray-Davis B, Solomon P, Marshall D, **Malott A**, Mueller V, Shaw E, Dore K, Burns S. (2012). A Team Observed Structured Clinical Encounter (TOSCE) for pre-licensure learners in maternity care: A short report of the development of an assessment tool. *JRIPE*, 3(1): 122-128. <https://jripe.org/index.php/journal/article/view/89>

Murray-Davis B, Marion A, **Malott A**, Reitsma A, Hutton EK. (2012). Women's experiences of participating in the early external cephalic version 2 (EECV2) trial. *Birth*, 39(1), 1-9. DOI: 10.1111/j.1523-536X.2011.00510.x

McDonald SD, Pullenayegum E, Bracken K, Chen AM, McDonald H, **Malott A**, Hutchison R, Haley S, Lutsiv O, Taylor V, Good C, Hutton E, Sword W. (2012). Comparison of midwifery, family medicine and obstetric patients' understanding of weight gain during pregnancy: a minority of women report correct counseling. *JOGC*, 34(2):129-135.

Malott AM, Murray Davis B, McDonald, Hutton EK. (2009). Midwifery care in eight industrialized countries: how does Canadian midwifery compare? *JOGC*, 31(10), 974-979.

Malott AM. (2008). Teaching skills for cultural competence: Are midwives prepared for practice? *CJMRP*. 7(3), 19-29.

Hutton EK, Kaufman K, Hodnett E, Amankwah K, Hewson SA, MacKay D, Szalai JP, Hannah ME for the Early External Cephalic Version Trial Collaborators Group (**Malott AM**). (2003). External cephalic version beginning at 34 weeks' gestation versus 37 weeks' gestation: a randomized multicenter trial. *AJOG*.189:245-54

Hutton EK, Saunders CA, Maobing T, Stoll K, Berkowitz J for the Early External Cephalic Version Trial Collaborators Group (**Malott AM**). (2008). Factors associated with a successful external cephalic version in the early ECV trial. *JOGC*, 30(1):23-28.

Other Abstracts

ii) Peer Reviewed

Malott AM. 2008. Evaluating interprofessional education among obstetrical learners. *JOGC*, 30(1):80

Other Posters

Malott AM. Collaborative models and continuity of care: Can they co-exist? Association of Ontario Midwives Annual Conference, Toronto. May 5-7, 2016,

Murray-Davis, B., Solomon, P., Marshall, D., **Malott, A.**, Shaw, E., Dore, K., Mueller, V. A team observed structured clinical encounter (TOSCE) for learners in maternity care: A pilot project. Collaborating Across Borders III Conference, Arizona. Nov, 2011.

Malott AM, Solomon P, Semogas, D. Interprofessional learning in the inner city. Day in faculty development: Innovations in education. McMaster University, Hamilton. April 29, 2009

Malott AM, Lynch B. Expressions in clay. Canadian Association of Midwives Annual Conference, Quebec City. Nov, 2008

Malott AM, McDonald, H. Orientation to enhance transition to practice. Canadian Association of Midwives Annual Conference, Quebec City. Nov, 2008

Malott AM. Interprofessional education in obstetrics. APOG conference, Toronto. Dec, 2007

Malott AM. Interprofessional education in obstetrics. Day in faculty development, Hamilton. Apr, 2008

Malott AM, McNiven P. Critical incident stress in midwifery practice. International Confederation of Midwifery 26th Triennial Congress, Vienna. Apr, 2002

McDonald H, **Malott AM**, McNiven P. Primary care midwifery in Ontario, Canada: education and practice. International Confederation of Midwifery 26th Triennial Congress, Vienna. Apr 2002

McNiven P, McDonald H, **Malott AM**, Kaufman K. Clinical competence: how is it best assessed? International Confederation of Midwifery 26th Triennial Congress, Vienna. Apr, 2002

M. PRESENTATIONS:

Peer Reviewed

Malott AM. Exploring new models of midwifery care. Canadian Association of Midwives Annual Conference *Midwifery: Growing a Sustainable Future* Halifax, Nova Scotia, October 24-25, 2019

Malott AM. Examining collaborative care practices: Are they innovative or unsustainable? Association of Ontario Midwives Research Symposium. Hamilton ON, November 13, 2017.

Malott AM. Interprofessional partnerships: The challenges and facilitators to collaborative care. Canadian Association of Midwives Annual Conference. Victoria BC, October 26-28th, 2016.

Malott AM. Integrating student voices in the creation and evaluation of learning module. European Midwifery Association Conference. Maastricht, The Netherlands. November 29-30, 2013

Malott AM. Organizational models of midwifery care across Canada: Maintaining principles while maximizing impact. AOM Conference 2013. Hockley Valley Resort, May 6-8, 2013

Malott AM. Integrating student voices in preparation for international placements. International Society for the Scholarship of Teaching and Learning conference *Research on Teaching and Learning: Integrating Practices*. Hamilton Convention Centre, Hamilton, October 24-27, 2012

Malott AM, Gately C. Interprofessional education in the inner city: Promoting collaboration and comprehensive care of marginalized populations. *Promoting Health Equity: Action on the Social Determinants of Health* Conference. Ryerson University, Toronto, February 12, 2011

Marshall D, Murray-Davis B, Solomon P, **Malott AM**, Shaw E, Dore K, Mueller V. The team observed structured clinical encounter (TOSCE) for maternity care: A workshop demonstrating its use as an assessment tool for teaching and learning. *Collaborating Across Borders III* Conference, Arizona. Nov 2011

Murray-Davis B, Hutton EK, McDonald H, **Malott AM**, McNiven P. Why do women choose home birth? Canadian Association of Midwives Conference: *The Place of Birth*, Edmonton. October 6-8, 2010

Murray-Davis B, Hutton EK, McDonald H, **Malott AM**, McNiven P. Keeping homebirth safe: Screening criteria used by midwives. Canadian Association of Midwives Conference: *The Place of Birth*, Edmonton. October 6-8, 2010

Malott AM, Wise C. Dodging bullets with confidence: creating an asynchronous web-based midwifery course. *Learning Technologies Symposium*. McMaster University, Hamilton, April 20, 2010

Malott AM, Kent N. Interprofessional teaching: Pitfalls and pearls *Association of Professors of Obstetrics & Gynecology of Canada* Toronto, Ontario, Dec, 2007

Malott AM. Midwifery outcomes in Ontario. *Len Lottimer Clinical Update Day* 2006, Michelangelo Banquet Centre, Hamilton, Ontario, October 25, 2006

Malott AM. Supporting breastfeeding women. *Regional Lactation Committee Annual Conference*, Royal Botanical Gardens, Burlington, Ontario, Jun, 2006

Invited

Malott AM, Midwifery in Canada: the growth of a “new” profession. Linköping, Sweden. March 2010

Malott AM. Reducing postpartum hemorrhage. St. Joseph’s Healthcare International Outreach Program. Mbarara, Uganda, Jan 2009

Malott AM, Hutchison, R. Active management of the third stage of labour. St. Joseph’s Healthcare International Outreach Program. Gulu, Uganda, Jan 2009

Malott AM, Hutchison, R. Neonatal resuscitation: practical skills for saving lives. St. Joseph’s Healthcare International Outreach Program. Gulu, Uganda, Jan 2009

Malott AM. Interprofessional education: positioning ourselves for the future. McMaster University, Health Sciences Education Retreat, Burlington, Ontario, Jun 25, 2008

Malott AM. ALARM faculty presentations. SOGC ALARM course, Toronto, Apr 20-21, 2008

Malott AM. Midwifery in Canada. Midwifery Education Program, College of Pilsen. Pilsen, Czech Republic, Jan 24, 2008

Malott AM. Midwifery in Canada. Midwifery Education Program, University of Prague. Prague, Czech Republic, Jan 25, 2008

Malott AM. Issues in Gender and Health: Intimate partner violence, the role of the midwife, 5th Biennial May Cohen Lecture in Women’s Health, Hamilton, Ontario, Oct, 2007

Malott AM, Bates S, Shaw E. Obstetrical consultation and collaboration, McMaster University, Hamilton, Ontario, Sept, 2007

Malott AM, McDonald, H. Teaching on the fly: Advanced preceptor workshop, Midwifery Education Program, Toronto, Ontario, Mar 26, 2007

Malott AM. Inter professional education initiatives in the midwifery education program To interdisciplinary visiting faculty from Okayama Prefectural University (Japan) Mar, 2007

Malott AM. Inter professional collaboration in obstetrics. Inter professional Health care Conference, McMaster University, Hamilton, Ontario, Jan, 2007

N. ADMINISTRATIVE RESPONSIBILITIES:

Program Review

2019 McMaster University, Midwifery Education Program
Accreditation Review Lead
Canadian Association of Midwifery Educators Council of
Accreditation

2018-19 McMaster University, Midwifery Education Program Review Lead
Responsible for preparing IQAP and Accreditation Reviews

Continuing Education Course Development

2019 Point of Care Ultrasound for Maternity Care: Participated in interdisciplinary group of faculty and clinicians in creating and delivering a combined online and in person certification course in point of care ultrasound for healthcare providers.

2020 Providing Contraceptive Care: Part I. Lead development of an interactive, 10 module online certification course for healthcare providers

Conference Planning

2017 Canadian Midwifery Educators Symposium
Planning Committee Chair
Hamilton, Ontario

2011 International Confederation of Midwifery 29th Triennial
Congress. Session Moderator.
Durban, South Africa

2010 Program for Interprofessional Practice Education and Research
Faculty Retreat Planner
Burlington, Ontario

2008-13 Society of Obstetrics & Gynecology of Canada
2015-20 ALARM Advances in Labour and Risk Management
Course co-coordinator Resident's Course (Annually)
Hamilton, Ontario

2007 International Women's & Children Conference
Faculty Advisor, Conference Planner & Moderator
McMaster University

2007-10 IPLICP Inner Professional Learning in the Inner City
Events Planner, Curriculum Development

National Committees

2007-2010 Aboriginal Health Initiatives Committee
Registered Midwife Advisory member
Society of Obstetrics & Gynecologists of Canada

2003-present Canadian Association of Midwives Educator's Committee
McMaster University Midwifery Education Program Faculty
Representative

Clinical Practice Committees

- 2018-present Chair Alongside Midwifery Unit Education Committee
Plan interprofessional rounds, unit teaching sessions, create and delivery interprofessional simulation events and virtual learning. Coordinate and evaluate learners in the AMU. Lead clinical and academic research, participate in professional writing and presentations showcasing innovation in the AMU.
- 2018-present AMU Governance
Report on educational advances of unit as a Centre of Excellence in Education
- 2007-2011 Obstetrical Education Committee
St Joseph's Healthcare
Events Planner
- 2006 Sept Head of Midwifery Service Selection Committee
St Joseph's Healthcare, Hamilton, Ontario
- 2004-2007 Joint Obstetrics & Neonatal Committee
Midwifery Representative
Hamilton Health Sciences Corporation
- 2005-2010 Perinatal Mental Health Coalition
Midwifery Representative
Hamilton, Ontario
- 1999-2004 Obstetrical Quality Assurance Committee,
Midwifery Representative
Hamilton Health Sciences Corporation
- 1997-2010 Regional Lactation Committee
Midwifery Representative

Academic Committees

- 2016-present &
2006-2011 Interprofessional Advisory Council to the Office of Interprofessional Education. Midwifery faculty providing input in the development of interprofessional learning in the Health Sciences. Participated in the application for grants to sustain IPE activities.
- 2015-2018 Ontario Midwifery Education Program Consortium Curriculum Committee Chair
- 2015-2018 Ontario Midwifery Education Program Consortium Course Coordinators Committee Chair

- 2007-2009 Enhancing Collaborative Decision-Making and Team Reflection in Health Professional Students
McMaster University
Working with Interprofessional faculty to promote collaboration in the development and evaluation of interprofessional learning opportunities for students in the Health Sciences programs
- 2006-2011 Gender and Poverty Interprofessional Education Initiative.
Involved in the development and evaluation of an interprofessional module on Gender and Poverty funded by the Office of Gender and Health, McMaster University.
- 2006 Jan-Jun Selection Committee for Assistant Dean
Midwifery Education Program, Faculty of Health Sciences
McMaster University
- 2004-2009 Equity Committee
Midwifery Faculty Representative
Midwifery Education Program
- 2002-present McMaster MEP Faculty Committee
McMaster University

Other Academic Responsibilities:

Midwifery Education Program Interviews
Midwifery Education Program Mini Multiple Interviews
MD Program Mini Multiple Interviews
Midwifery OSCE Assessor
IPE TOSCE Assessor

Clinical Administration/Leadership Roles:

- 2018-present AMU Clinical Educator
Education coordinator of AMU midwifery students
- 2007-2011 Obstetrical Education Committee
St Joseph's Healthcare, Hamilton, Ontario
Events Planner
- 2006 Sept Head of Midwifery Service Selection Committee
St Joseph's Healthcare, Hamilton, Ontario
- 2005-2011 Regional Perinatal Mental Health Coalition
Midwifery Representative interfacing with multiple community agencies addressing issues in maternal mental health.
Hamilton, Ontario

- 2004-2011 Joint Obstetrics & Neonatal Committee
 Midwifery Representative
 Hamilton Health Sciences Corporation
 Hamilton, Ontario
- 1999-2004 Obstetrical Quality Assurance Committee,
 Midwifery Representative
 Hamilton Health Sciences Corporation
 Hamilton, Ontario
- 1997-2007 Regional Lactation Committee
 Midwifery Representative
 Hamilton-Wentworth and Surrounding area

O. DEVELOPMENT IN EDUCATION:

Faculty Development Leadership 101
 Program for Faculty Development, McMaster University
 June 2, 2020

Coaching Advantage
 Markham Stouffville Hospital, Markham Ontario
 September-March, 2019-2020

Steps Leadership
 Markham Stouffville Hospital, Markham Ontario
 October -March, 2018-2019

Faculty Development Think Tank
 Program for Faculty Development, McMaster University
 Dec 10, 2008

Essentials of Interprofessional Education II
 Program for Faculty Development, McMaster University
 May 12, 2008

Working with International Medical Graduates: Assessing Learning Needs and individualizing tailored teaching programs.
 Program for Faculty Development, McMaster University
 Feb 28, 2008

Working with International Medical Graduates: Promoting Patient Centred Communication & Effective Communication with Patients
 Program for Faculty Development, McMaster University
 Jan 30, 2008

Advances in Labour and Risk Management (ALARM) Instructor Training
 SOGC, Toronto
 December 4, 2007

Advances in Labour and Risk Management (ALARM)
SOGC, Ottawa
June 19 & 20, 2007

Collaborative Research Skills Workshop
School of Nursing, McMaster University
Nov 13 & 14, 2005

Advanced Life Support in Obstetrics (ALSO)
Department of Family Medicine, McMaster University
March, 2005

Teaching on the Fly: Maximizing Clinical Teaching
Program for Faculty Development, McMaster University
Oct, 2004

Creating a Culture for Nursing Research: A Collaborative Research Skills Workshop
McMaster Faculty of Nursing
Oct, 2003

Learning Technology Symposium
McMaster University
Dec, 2002

Teaching and Learning in the Clinical Setting
Program for Faculty Development, McMaster University
Oct 21 & 22, 2002

The Difficult Learning Situation: A Practical Approach to Working with Students
Program for Faculty Development, McMaster University
June, 2002

AM:1/20/2021

Curriculum Vitae

Cristina A. Mattison

Business address

McMaster Midwifery Research Centre
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McMaster University
1280 Main St. West, HSC-4H26
Hamilton, ON Canada L8S 4K1 Canada
Tel: +1 905 525 9140 x22146
Email: mattisc@mcmaster.ca
Web: mmrc.mcmaster.ca

Personal data

Birth date: 28 December 1978 (Manhattan, NY)
Citizenship: Canadian

Education

PhD

Health Policy Program, McMaster University, Hamilton, Ontario, Canada (2017)
Thesis: Understanding the roles of midwives in political and health systems (Supervisor: Dr. John N. Lavis; Committee: Dr. Eileen K. Hutton, Dr. Michael G. Wilson and Dr. Michelle L. Dion)

MSc

Global Health Program, McMaster University, Hamilton, Ontario, Canada (2011)
Scholarly paper: Strengthening health systems through the levels of fistula care framework (Supervisor: Dr. Del G. Harnish)

BA (Honours)

Psychology, University of Waterloo, Waterloo, Ontario, Canada (2002)
Thesis: Leadership bias against females: Spontaneous trait inference approach (Supervisor: Dr. Doug Brown)

Current Status

Post-doctoral Fellow, McMaster Midwifery Research Centre, McMaster University
(May 2019 -)

Assistant Professor (Part-Time), Department of Health Research Methods, Evidence and Impact,
McMaster University (March 2019 -)

Professional Organizations

Academics Without Borders (2019 -)

Canadian Association for Health Services and Policy Research (2015 -)

Canadian Coalition for Global Health Research (2014, 2015, 2019 -)

Employment History

Academic

- | | |
|---------|---|
| 2018-19 | Scientific Lead, Stakeholder Engagement and Systems Analysis, McMaster Health Forum, McMaster University |
| 2016-18 | Post-doctoral Fellow, Department of Health Research Methods, Evidence, and Impact, McMaster Health Forum, McMaster University |
| 2016 | Teaching Assistant, Health Forum Practicum
Bachelor of Health Sciences, McMaster University |
| 2014-15 | Teaching Assistant, Health Systems and Health Policy
Bachelor of Health Sciences, McMaster University |
| 2013-17 | Research Assistant, McMaster Health Forum's Impact Lab
Health Systems Evidence, McMaster University |
| 2011-12 | Research Associate, Fistula Care, Monitoring, Evaluation and Research, EngenderHealth |
| 2009-10 | Research Program Coordinator, Community Alliances for Health Research and Knowledge Translation in Pain, McMaster University |
| 2004-09 | Research Associate, Arthritis Community Research & Evaluation Unit, University Health Network |
| 2007-08 | Research Coordinator, Department of Physical Therapy, University of Toronto |
| 2004-05 | Research Associate, Department of Clinical Epidemiology & Biostatistics, McMaster University |
| 1999-02 | Research Assistant, Industrial & Organizational Psychology Research Laboratory, University of Waterloo |

Other

2017 - 18 Expert Advisor, Social Research and Demonstration Corporation,
Ottawa

Scholarly and Professional Activities

Journal referee

Health Policy (2020)
Health Research Policy and Systems (2020)
BMJ Open (2019)
Journal of Patient-Reported Outcomes (2019)
Birth (2018)
Health Reform Observer - Observatoire des Réformes de Santé (2016)

External grant reviews

MicroResearch, grant reviewer (2019 - present)
Ontario Midwifery Conference, external peer review of research-based abstracts,
Association of Ontario Midwives (Winter 2019, Winter 2020)
Midwifery Research Mentored Grants, external peer review, Association of Ontario
Midwives (Fall 2018)

Training/certification

Bystander intervention and social justice in the academic workplace, McMaster University
(2019)
Core competency module for sex and gender in primary data collection with human participants,
CIHR Institute of Gender and Health (2019)
Basic security in the field/advanced security in the field, United Nations Department of Safety
and Security (2019)
Good clinical practice, CITI Program (2019)
Tutorial for researchers conducting retrospective review of health records, Hamilton Integrated
Research Ethics Board (2019)
Global health mentee, MentorNet program, Canadian Society for International Health (2014 -
15)

Areas of Interest

Health systems and health policy
Sexual and reproductive health and rights
Global health
Mixed methods research
Politics of health systems

Honours

Recipient of International Policy Ideas Challenge, Global Affairs Canada and Social Sciences and Humanities Research Council of Canada, Government of Canada (2020)

Faculty of Health Sciences Graduate Programs Excellence Award, McMaster University (2017, 2018)

Pat Martens memorial student prize for best student abstract, Maternal and Child Health, Canadian Association for Health Services and Policy Research Theme Group (2017)

Graduate scholarship, Faculty of Health Sciences Research Plenary, McMaster University (2011, 2014, 2017)

Robert Wood Johnson Foundation travel award, Inter-university Consortium for Political and Social Research. Summer program in quantitative methods of social research. Immigration, immigrants and health conditions, health status, and policies: Examining multilevel and multidimensional models and approaches. University of Michigan, Ann Arbor, U.S.A. (2015)

Graduate scholarship, Faculty of Health Sciences Research Plenary, McMaster University (2014)

Outstanding poster presentation award, Faculty of Health Sciences Research Plenary, McMaster University (2011, 2014)

Honours thesis award, Certificate for Academic Excellence, Canadian Psychological Association (2002)

Teaching Roles

Undergraduate

Professional Competencies, Health Systems and Policy, (Guest Instructor) Physician Assistant Education Program, McMaster University, Hamilton, Ontario, Canada (14 October 2020).

Professional Competencies, Determinants of Health: Understanding Influences on Health and Inequalities, (Guest Instructor) Physician Assistant Education Program, McMaster University, Hamilton, Ontario, Canada (29 September 2020).

GSFS 400 Capstone: Engaging in the Fields of Gender, Sexuality, Feminist, and Social Justice Studies, Making a Research Plan, (Guest Instructor), Bachelor of Arts (Hons. Gender, Sexuality, Feminist, and Social Justice Studies), McGill University, Montreal, Quebec, Canada (24 September 2020).

Midwifery 1F03, Introduction to Research Methods and Critical Appraisal, (Guest Instructor) Midwifery Education Program, McMaster University, Hamilton, Ontario, Canada (4 March 2020 and 18 March 2020).

Health Forum Practicum 4YY3 (Instructor), Bachelor of Health Sciences (Hons.) Program, McMaster University, Hamilton, Ontario, Canada (two sessions Winter 2018 and Fall 2019).

Health Systems and Health Policy 3GG3 (Instructor), Bachelor of Health Sciences (Hons.) Program, McMaster University, Hamilton, Ontario, Canada (10 sessions Winter 2018 and 14 sessions Winter 2019).

Graduate

Health Policy 747, Qualitative and Conceptual Research Methods (Instructor), Health Policy PhD Program, McMaster University, Hamilton, Ontario, Canada (Winter 2021).

Health Policy 711, Doctoral Seminar in Health Policy (Instructor), Health Policy PhD Program, McMaster University, Hamilton, Ontario, Canada (two sessions Fall 2017, one session Fall 2018, five sessions Winter 2018, five sessions Winter 2019, Winter 2020, and Winter 2021).

Family Relations and Applied Nutrition 6221, Evidence-Based Practice and Knowledge Translation, What we're learning about supporting evidence-informed policymaking, (Guest Instructor) Family Relations and Applied Nutrition Program, University of Guelph, Guelph, Ontario, Canada (19 March 2019).

Health Policy 738, Health Policy Analysis (Guest Instructor), "Applying Kingdon and 3i+E Frameworks", Health Policy PhD Program, McMaster University, Hamilton, Ontario, Canada (21 November 2017 and 19 November 2019).

Business C715, Health Care Funding and Resource Allocation, (Guest Instructor), Master of Business Administration Program, DeGroote School of Business, McMaster University, Hamilton, Ontario, Canada (15 March 2016 and 8 February 2017).

Supervisory Roles

Member, Doctoral student committee

PhD committee member, Susana Ku, Global Health PhD Program, McMaster University (September 2020 – present)

Leadership Roles

Workshop Facilitator

Evidence-informed recommendations for midwifery association strengthening and healthcare skills transfer, Canadian Association of Midwives Global, Montreal, Quebec, Canada (22 September 2020).

Physician Assistant Research Kickstarter Workshop, Physician Assistant Program, McMaster University, Hamilton, Ontario, Canada (1 June 2019).

Health Systems Learning. Finding and using research evidence to inform decision-

Making. Winter training workshop. Ministry of Health and Long-Term Care, Toronto, Ontario, Canada (12 March 2019, 18 September 2018, 24 July 2018 and 6 February 2018).

Health Systems Learning. Finding and using research evidence. Queen Elizabeth Scholarship in Strengthening Health Systems, Hamilton, Ontario, Canada (13-15 June 2018).

Health Systems Learning. Setting agendas. Queen Elizabeth Scholarship in Strengthening Health Systems, Hamilton, Ontario, Canada (18-19 June 2018).

Health Systems Learning. Understanding health system building blocks: Care using select treatments. Queen Elizabeth Scholarship in Strengthening Health Systems, Hamilton, Ontario, Canada (26 June 2018).

Health Systems Learning. Understanding health system building blocks: Care for select populations. Queen Elizabeth Scholarship in Strengthening Health Systems, Hamilton, Ontario, Canada (26 June 2018).

Evidence-informed policy workshop: Strengthening health systems in Canada and low-and-middle income countries (co-facilitated with Dr. John N. Lavis), McMaster Health Forum, Hamilton, Ontario, Canada (9 October 2014).

Lifetime Research Funding

Peer-reviewed Grants as Principal Investigator

1. Mattison CA (NPI), Hackett C (PI), Dion ML. Examination of how education impacts labour market outcomes for Indigenous women in Canada. Indigenous and Northern Affairs Canada and Statistics Canada's Canadian Research Data Centre Network, \$6,000 (2016 - 2017).
2. Mattison CA (Intern), Bourret KM (Intern), Darling EK (Internship supervisor). Evaluating skill transfer between Canadian and Global South midwifery associations. Mitacs Accelerate Fellowship, \$75,000 (2019 - 2020).

Peer-reviewed Grants as Co-investigator

1. Hackett C (NPI), Mattison CA (PI), Dion ML. Understanding the role of health in labour market outcomes among Indigenous peoples (off-reserve) in Canada. Indigenous and Northern Affairs Canada and Statistics Canada's Canadian Research Data Centre Network, \$6,000 (2016 - 2017).
2. Darling EK (PI), Aerts L, Mattison CA, Norman W, Dunn S, Guilbert E. Planning to create partnerships and advance research to understand system-level opportunities to

- expand midwives' contributions to improve access to sexual and reproductive health care. CIHR Planning and Dissemination Grant, \$20,000 (2019 - 2020).
3. Murray-Davis B, Darling EK, Hutton EK, Banfield L, Brunton G, Kaufman K, Mattison CA. Developing a Canadian strategy to identify and prioritize midwifery research capacity and knowledge translation. CIHR Planning and Dissemination Grant, \$20,000 (2019 - 2020).
 4. Darling EK (PI), Mattison CA (Co-PI), Begun S, Cameron C, Gaudet L, Guindon E, Mbuagbaw L, McGee A, Norman W, Tarride J. Value for money: A mixed methods study to investigate the impact of funding expanded midwifery care models in Canada. CIHR Operating Grant: ECI grants in Maternal, Reproductive, Child & Youth Health, \$210,000 (\$105,000 + \$105,000 matched funds) (2019 - 2022).

Lifetime Publications

Peer-reviewed book contributions

1. Lavis JN, **Mattison CA**. Introduction and overview. In Lavis JN (editor), Ontario's health system: Key insights for engaged citizens, professionals and policymakers. Hamilton: McMaster Health Forum; 2016, p. 15-43.
2. Moat KM, **Mattison CA**, Lavis JN. Financial arrangements. In Lavis JN (editor), Ontario's health system: Key insights for engaged citizens, professionals and policymakers. Hamilton: McMaster Health Forum; 2016, p. 73-122.
3. Wilson MG, **Mattison CA**, Lavis JN. Delivery arrangements 1: Infrastructure. In Lavis JN (editor), Ontario's health system: Key insights for engaged citizens, professionals and policymakers. Hamilton: McMaster Health Forum; 2016, p. 123-74.
4. **Mattison CA**, Lavis JN. Delivery arrangements 2: Workforce. In Lavis JN (editor), Ontario's health system: Key insights for engaged citizens, professionals and policymakers. Hamilton: McMaster Health Forum; 2016, p. 175-207.
5. **Mattison CA**, Lavis JN. Care using select treatments. In Lavis JN (editor), Ontario's health system: Key insights for engaged citizens, professionals and policymakers. Hamilton: McMaster Health Forum; 2016, p. 315-47.
6. **Mattison CA**, Doxtater K, Lavis JN. Care for Indigenous peoples. In Lavis JN (editor), Ontario's health system: Key insights for engaged citizens, professionals and policymakers. Hamilton: McMaster Health Forum; 2016, p. 349-73.
7. Wilson MG, **Mattison CA**, Lavis JN. Reforms. In Lavis JN (editor), Ontario's health system: Key insights for engaged citizens, professionals and policymakers. Hamilton: McMaster Health Forum; 2016, p. 375-400.

8. **Mattison CA**. 2018. Health Policy Analysis in Midwifery. In Murray-Davis B, Hutton E, Kaufman K, Carty E, Wainman B, editors. *Comprehensive Midwifery: An Interactive Approach to the Theory & Evidence of Practice: Professional Roles*. Hamilton: The e-Book Foundry @ McMaster University.

Peer-reviewed journal articles

1. Gignac MAM, Backman C, Davis AM, Lacaille D, **Mattison CA**, Badley EM. Understanding social role participation: What matters to people with arthritis? *Journal of Rheumatology* 2008; 35(8), 1655-63. [PMID: 18597401]
2. Landry E, Pett C, Fiorentino R, Ruminjo J, **Mattison CA**. Assessing the quality of record keeping for cesarean deliveries: results from a multicenter retrospective record review in five low-income countries. *BMC Pregnancy Childbirth*. 2014 Apr 12;14(1):139. [PMID: 24726010]
3. **Mattison, CA**. Introducing midwifery-led birth centres to Ontario. *Health Reform Observer - Observatoire des Réformes de Santé*. 2015 Mar 16; 3(1): Article 2. [DOI:dx.doi.org/10.13162/hro-ors.v3i1.559]
4. **Mattison CA**, Waddell K, Wang RH, Wilson MG. Citizen and stakeholder perspectives about approaches to enhance equitable access to assistive technologies for older adults. *Studies in Health Technologies and Informatics*. 2017;242:48-51. [PMID: 28873775]
5. **Mattison CA**, Dion ML, Lavis JN, Hutton EK, Wilson MG. Midwifery and obstetrics: Factors influencing mothers' satisfaction with the birth experience. *Birth*. 2018;45:322–327. [DOI: [10.1111/birt.12352](https://doi.org/10.1111/birt.12352)]
6. **Mattison CA**, Wilson MG, Wang RH, Waddell K. Enhancing equitable access to assistive technologies in Canada: Insights from citizens and stakeholders. *Canadian Journal on Aging*. 2020;39(1)69-88. [DOI: [10.1017/S0714980819000187](https://doi.org/10.1017/S0714980819000187)]
7. **Mattison CA**, Lavis JN, Hutton EK, Dion ML, Wilson MG. Understanding the conditions that influence the roles of midwives in Ontario, Canada's health system: An embedded single-case study. *BMC Health Services Research*. 2020;20(1):197. [DOI: [10.1186/s12913-020-5033-x](https://doi.org/10.1186/s12913-020-5033-x)]
8. **Mattison CA**, Lavis JN, Wilson MG, Hutton EK, Dion ML. A critical interpretive synthesis of the roles of midwives in health systems. *Health Research Policy and Systems*. 2020;19(77). [DOI: [10.1186/s12961-020-00590-0](https://doi.org/10.1186/s12961-020-00590-0)]
9. Wilson MG, **Mattison CA**, Waddell K, Bacon J, Becker M, Bibeau C, Lavis JN, Rosenses R, Kendall CE. Enhancing the delivery of comprehensive care for people living with HIV in Canada: Insights from citizens and stakeholders. Under review.

10. **Mattison CA**, Bourret KM, Hébert E, Robinson J, Darling EK. Building sustainable midwifery associations to support the integration of midwifery in health systems: An evidence-informed framework for midwifery professional association strengthening. Under review.

Journal manuscripts under development

1. Bourret KM, **Mattison CA**, Hébert E, Robinson J, Darling EK. Measuring impact: A framework for evaluating midwifery emergency obstetric and neonatal care skills transfer.
2. **Mattison CA**, Dion ML. A research note on the value of combining evidence syntheses with network analyses.

Unpublished reports

1. **Mattison CA**, Fiorentino R. 2011. Strengthening health systems through the levels of fistula care framework—A literature review. New York: EngenderHealth, Fistula Care, United States Agency for International Development. Available at: http://pdf.usaid.gov/pdf_docs/pa00jf4c.pdf
2. **Mattison CA**, Fiorentino R. Fistula Care. 2012. Retrospective record review of indications for cesarean deliveries at Dosso Regional Hospital, Niger. Study Report. New York: EngenderHealth, Fistula Care, United States Agency for International Development.
3. **Mattison CA**, Fiorentino R. Fistula Care. 2012. Retrospective record review of indications for cesarean deliveries at Tahoua Regional Hospital, Niger. Study Report. New York: EngenderHealth, Fistula Care, United States Agency for International Development.
4. **Mattison CA**, Fiorentino R. Fistula Care. 2012. Retrospective record review of indications for cesarean deliveries at Maradi Regional Hospital, Niger. Study Report. New York: EngenderHealth, Fistula Care, United States Agency for International Development.
5. **Mattison CA**, Fiorentino R. Fistula Care. 2012. Retrospective record review of indications for cesarean deliveries at Kissidougou Prefectural Hospital, Guinea. Study Report. New York: EngenderHealth, Fistula Care, United States Agency for International Development.
6. **Mattison CA**, Fiorentino R. Fistula Care. 2012. Retrospective record review of indications for cesarean deliveries at Kindia Regional Hospital, Guinea. Study Report. New York: EngenderHealth, Fistula Care, United States Agency for International Development.

7. **Mattison CA**. 2015. Introducing midwifery-led birth centres to Ontario. Health Systems in Transition (HiT) profile of Canada. Chapter 5, section 5.1. European Observatory on Health Systems and Policies.
8. Landry E, Pett C, Fiorentino R, Ruminjo J, **Mattison CA**. 2016. Evaluating the feasibility of a cesarean indication classification system from a retrospective record review in five countries. New York: EngenderHealth, Fistula Care Plus.
9. **Mattison CA**, Waddell K, Wang RH, Wilson MG. Citizen Brief: Enhancing equitable access to assistive technologies for older adults in Canada. Hamilton: McMaster Health Forum, 7 April 2017.
10. **Mattison CA**, Waddell K, Wilson MG. Panel summary: Enhancing equitable access to assistive technologies in Canada. Hamilton: McMaster Health Forum, 5 May 2017.
11. **Mattison CA**, Wilson MG, Wang RH, Waddell K. Evidence Brief: Enhancing equitable access to assistive technologies for older adults in Canada. Hamilton: McMaster Health Forum, 8 June 2017.
12. Waddell K, Wilson MG, **Mattison CA**. Dialogue summary: Enhancing equitable access to assistive technologies in Canada. Hamilton: McMaster Health Forum, 8 June 2017.
13. **Mattison CA**, Wilson MG. Rapid Synthesis: Examining the effects of value-based physician payment models. Hamilton: McMaster Health Forum, 10 October 2017.
14. Waddell K, Gauvin FP, **Mattison CA**. Rapid synthesis: Fostering K-12 students' global competencies. Hamilton: McMaster Health Forum | Forum+, 17 November 2017.
15. **Mattison CA**, Gauvin FP, Waddell K. Rapid synthesis: Supporting professional learning approaches to foster global competencies in K-12 education. Hamilton: McMaster Health Forum | Forum+, 17 November 2017.
16. **Mattison CA**, Gauvin FP, Wilson MG. Rapid synthesis: Examining the public provision and funding of PET-CT imaging for non-cancer indications. Hamilton: McMaster Health Forum, 15 February 2018.
17. **Mattison CA**, Moat KA, Waddell K, Lavis JN. Citizen brief: Optimizing patient and family transitions from cancer treatment to primary- and community-care supports in Canada. Hamilton: McMaster Health Forum, 2 March 2018.
18. **Mattison CA**, Moat KA, Waddell K, Lavis JN. Evidence brief: Optimizing patient and family transitions from cancer treatment to primary- and community-care supports in Canada. Hamilton: McMaster Health Forum, 27 March 2018.

19. **Mattison CA**, Gauvin FP, Wilson MG. Panels summary: Optimizing patient and family transitions from cancer treatment to primary- and community-care supports in Canada. Hamilton: McMaster Health Forum, 2 March 2018.
20. **Mattison CA**, Wilson MG. Dialogue Summary: Optimizing patient and family transitions from cancer treatment to primary- and community-care supports in Canada. Hamilton: McMaster Health Forum, 27 March 2018.
21. Waddell K, Wilson MG, Panchal P, **Mattison CA**. Rapid synthesis: Identifying effective and cost-effective population-level approaches to promote healthy eating. Hamilton: McMaster Health Forum, 29 March 2018.
22. **Mattison CA**, Wilson MG, Gauvin FP. Rapid synthesis: Identifying tax benefits or incentives to reduce poverty among older adults. Hamilton: McMaster Health Forum | Forum+, 30 March 2018.
23. Wilson MG, **Mattison CA**, Waddell K. Rapid synthesis: Identifying approaches to measure, monitor and evaluate dementia strategies. Hamilton: McMaster Health Forum, 6 April 2018.
24. **Mattison CA**, Wilson MG. Rapid synthesis: Engaging nurse practitioners in the health workforce. Hamilton, Canada: McMaster Health Forum, September 2018.
25. **Mattison CA**, Moat KA, Scallan EM, Lavis JN, Gauvin FP. Citizen brief: Reducing emergency department usage in people with inflammatory bowel disease in provincial health systems in Canada. Hamilton, Canada: McMaster Health Forum, 14 September 2018.
26. Sharma K, Belesiotis P, **Mattison CA**, Wilson MG. Rapid synthesis: Examining the impact of harm-reduction based educational interventions for families affected by opioid addiction. Hamilton, Canada: McMaster Health Forum, 31 October 2018.
27. **Mattison CA**, Moat KA, Scallan EM, Lavis JN. Evidence brief: Reducing emergency department usage in people with inflammatory bowel disease in provincial health systems in Canada. Hamilton, Canada: McMaster Health Forum, 22 November 2018.
28. Lavis JN, Gauvin FP, **Mattison CA**, Moat KA, Waddell K, Wilson MG, Reid RJ. Rapid synthesis: Creating rapid-learning health systems in Canada. Hamilton, Canada: McMaster Health Forum, 10 December 2018.
29. **Mattison CA**. Appendix B4: Saskatchewan. In Rapid synthesis: Creating rapid-learning health systems in Canada. Hamilton, Canada: McMaster Health Forum, 10 December 2018.

30. **Mattison CA**. Appendix B5: Manitoba. In Rapid synthesis: Creating rapid-learning health systems in Canada. Hamilton, Canada: McMaster Health Forum, 10 December 2018.
31. Lavis JN, Gauvin FP, **Mattison CA**, Moat KA, Waddell K, Wilson MG, Reid RJ. Appendix C1: Health system as a whole: Creating rapid-learning health systems in Canada. Hamilton, Canada: McMaster Health Forum, 10 December 2018.
32. Lavis JN, Gauvin FP, **Mattison CA**, Moat KA, Waddell K, Wilson MG, Reid RJ. Appendix C2: Primary-care sector: Creating rapid-learning health systems in Canada. Hamilton, Canada: McMaster Health Forum, 10 December 2018.
33. Lavis JN, Gauvin FP, **Mattison CA**, Moat KA, Waddell K, Wilson MG, Reid RJ. Appendix C3: Elderly population: Creating rapid-learning health systems in Canada. Hamilton, Canada: McMaster Health Forum, 10 December 2018.
34. **Mattison CA**, Waddell K, Belal AA, Scallan EM, Wilson MG. Rapid synthesis: Enhancing health promotion and disease prevention in networked primary care. Hamilton: McMaster Health Forum, 21 December 2018.
35. **Mattison CA**, Belesiotis P, Wilson MG. Rapid synthesis: Determining the features of managed alcohol programs. Hamilton: McMaster Health Forum, 11 February 2019.
36. **Mattison CA**, Wilson MG. Rapid synthesis: Economic analyses of policies to reduce cervical cancer. Hamilton: McMaster Health Forum, 15 February 2019.
37. **Mattison CA**, Wilson MG. Rapid synthesis: Enhancing the efficiency and effectiveness of non-urgent transportation models. Hamilton: McMaster Health Forum, 29 March 2019.
38. Wilson MG, **Mattison CA**, Gao C, Kendall CE, Lavis JN. Citizen brief: Enhancing the delivery of comprehensive care for people living with HIV in Canada. Hamilton, Canada: McMaster Health Forum, 5 April 2019.
39. Wilson MG, **Mattison CA**. Panels summary: Enhancing the delivery of comprehensive care for people living with HIV in Canada. Hamilton, Canada: McMaster Health Forum, 12 April 2019.
40. Wilson MG, **Mattison CA**, Gao C, Scallan EM, Lavis JN. Evidence brief: Enhancing the delivery of comprehensive care for people living with HIV in Canada. Hamilton, Canada: McMaster Health Forum, 14 May 2019.
41. **Mattison CA**, Easterbrook R, Grenier LN, Darling EK. Evidence Synthesis: Examining expanded roles for midwives in sexual and reproductive healthcare in Canada. Hamilton: McMaster Midwifery Research Centre, 3 April 2020.

42. **Mattison CA**, Bourret KM. Policy brief: Investing in midwifery associations to strengthen midwifery services to improve sexual and reproductive health and rights: A policy brief for grounding the Feminist International Assistance Policy in evidence. Hamilton: McMaster Midwifery Research Centre, 27 November 2020.

Presentations

Invited

1. Mattison CA. Midwifery and obstetrics: Factors influencing mothers' satisfaction with the birth experience. Midwifery Research Symposium, McMaster University, Hamilton, Ontario, Canada, 5 April 2017.
2. Mattison CA, Hackett C. The factors that influence labour market outcomes for Indigenous women living in Canada. Canadian Research Data Centre Network – Indigenous and Northern Affairs Canada Policy Workshop on Indigenous Issues, Ottawa, Ontario, Canada, 26 May 2017.
3. Hackett C, Mattison CA. Health, mental health, and labour market outcomes of Indigenous peoples living in Canada. Canadian Research Data Centre Network – Indigenous and Northern Affairs Canada Policy Workshop on Indigenous Issues, Ottawa, Ontario, Canada, 26 May 2017.
4. Mattison CA. Health related career trajectories session. Health Forum Practicum – 4YY3, Bachelor of Health Sciences, McMaster University, McMaster University, Hamilton, Ontario, Canada, 29 March 2018.
5. Mattison CA, Wilson MG. Effects of Value-based Physician Payment Models: Findings from a Rapid Synthesis. Council for Innovation Procurement in Health Care, The Conference Board of Canada, Ottawa, Ontario, Canada, 7 November 2018.
6. Mattison CA. Health related career trajectories session. Health Forum Practicum – 4YY3, Bachelor of Health Sciences, McMaster University, McMaster University, Hamilton, Ontario, Canada, 4 April 2019.
7. Mattison CA. How research informs policies related to midwifery. McMaster Midwifery Research Centre Research Seminar Series. McMaster University, Hamilton, Ontario, Canada, 23 July 2019.
8. Mattison CA, Bourret KM. Developing the evidence for midwifery association capacity building. Presentation to the Canadian Association of Midwives' Board of Directors, Montreal, Quebec, Canada, 5 June 2020.
9. Mattison CA. Strengthening midwifery professional associations. Midwifery Research Symposium, McMaster University, Hamilton, Ontario, Canada, 28 October 2020.

Peer-reviewed conference oral presentations

1. Backman C, Gignac M, Badley E, Davis A, Koehn C, Lacaille D, Mattison CA, Montie P. Participation: A conceptual framework to guide research. Canadian Association of Occupational Therapists Annual Conference, Montreal, Canada, 1-3 June 2006.
2. Hunter J, Jeji T, Mattison CA, Shantharam Y, Uleryk E, Henry JL. Identifying research priorities that will advance policy and practice for people living with neuropathic pain after spinal cord injury. Canadian Pain Society Annual Conference, Niagara Falls, ON, Canada, 13-16 April 2011.
3. Landry E, Fiorentino R, Ruminjo J, McKay M, Mattison CA. Retrospective record review of cesarean deliveries at 9 hospitals in Bangladesh, Guinea, Mali, Niger, and Uganda. Oral presentation at the 2011 American Public Health Association 139th Annual Meeting, Washington, DC, USA, 29 October – 2 November 2011.
4. Hunter J, Jeji T, Mattison CA, Shantharam Y, Uleryk E, Henry JL. Identifying research priorities that will advance policy and practice for people living with neuropathic pain after spinal cord injury. Canadian Pain Society Conference, Whistler, BC, Canada, 23-26 May 2012.
5. Hunter J, Jeji T, Mattison CA, Shantharam Y, Uleryk E, Henry JL. Scoping the field of research and management of neuropathic pain after spinal cord injury. Interdependence 2012, Global Spinal Cord Injury Conference, Vancouver, BC, Canada, 23-26 May 2012.
6. Jeji T, Mattison CA, Shantharam Y, Uleryk E, Henry JL. A scoping study to determine the current state of knowledge for neuropathic pain and spinal cord injury. 4th National Spinal Cord Injury Conference, Niagara, ON, Canada, 29-30 October 2012.
7. Moussa F, Moussa M, Arzika A, Mattison CA, Landry E, Fiorentino R. Indications, quality of care and outcomes for cesarean delivery: Results from a three-hospital retrospective record review in Niger. Second Global Symposium on Health Systems Research, Beijing, China, 31 October 0 3 November 2012.
8. Mattison CA. The economics of midwifery-led birth centres in Ontario. Clinical Epidemiology and Biostatistics Research Day, McMaster University, Hamilton, ON, Canada, 27 March 2014.
9. Mattison CA. Ideational Scholarship and Path Dependence: A Comparative Analysis of Ontario's New Midwifery Model. Centre for Health Economics and Policy Analysis New Frontiers in Health Policy Research Conference, Hamilton, ON, Canada, 12 April 2014.

10. Mattison CA. Ontario and Quebec: Examining midwifery legislation and divergent policy outcomes. Centre for Health Economics and Policy Analysis New Frontiers in Health Policy Research Conference, Hamilton, ON, Canada, 9 March 2015.
11. Mattison CA, Dion ML. Satisfaction with pregnancy and birth: Experiences with midwives in Ontario. Canadian Association of Midwives' 15th Annual Conference, Montreal, QC, Canada, 5 November 2015.
12. Mattison CA, Leake P. Midwives doing research: A how-to guide for conducting focus groups. Association of Ontario Midwives Annual Conference, Niagara-on-the-Lake, ON, Canada, 18 May 2016.
13. Mattison CA, Hackett C, Dion ML. The factors that influence labour market outcomes for Indigenous women living in Canada. Canadian Research Data Centre Network Annual Conference, Saskatoon, SK, Canada, 1 November 2016.
14. Hackett C, Mattison CA, Dion ML. Health, mental health, and labour market outcomes of Indigenous peoples living in Canada. Canadian Research Data Centre Network Annual Conference, Saskatoon, SK, Canada, 1 November 2016.
15. Mattison CA, Lavis JN, Hutton EK, Wilson M, Dion M. Understanding the role and integration of midwifery in Ontario's health system. Canadian Association for Health Services and Policy Research, Toronto, ON, Canada, 24 May 2017.
16. Mattison CA, Lavis JN, Hutton EK, Wilson M. Understanding the role of midwifery in health systems. 31st International Confederation of Midwives Triennial Congress, Toronto, ON, Canada, 19 June 2017.
17. Mattison CA, Waddell K, Wang RH, Wilson MG. Citizen and stakeholder perspectives about approaches to enhance equitable access to assistive technologies for older adults. Association for the Advancement of Assistive Technology in Europe, Sheffield, England, 13 September 2017.
18. Mattison CA. Understanding the roles of midwives in health systems: A critical interpretive synthesis and network analysis. Faculty of Health Science Research Day, McMaster University, Hamilton, Ontario, Canada, 15 May 2018.
19. Wilson MG, Wang R, Mattison CA. An examination of ethical issues related to access to assistive technology: A scoping review. AGE-WELL Conference Scientific Talk, Vancouver, BC, Canada, 17 October 2018.
20. Wilson MG, Lavis JN, Waddell K, Gauvin FP, Mattison CA, Moat KA. Evolution of an approach to rapidly synthesizing evidence about pressing health-system issues. Canadian Association for Health Services and Policy Research, Halifax, Nova Scotia, Canada, 30 May 2019.

21. Mattison CA, Bourret KM, Robinson J. A practical ‘how to’ workshop focused on developing evidence informed frameworks to evaluate global projects in low-and middle-income countries. Canadian Society for International Health, Ottawa, Ontario, Canada, 19 October 2019.
22. Bourret KM, Mattison CA, Darling EK. Measuring the impact of the Canadian Association of Midwives’ global projects. Canadian Association of Midwives’ Annual Conference, Halifax, Nova Scotia, Canada, 24 October 2019.
23. Mattison CA, Bourret KM, Hébert E, Robinson J, Darling EK. Canadian Association of Midwives’ Global: Building the evidence for best practices in midwifery skills transfer and reciprocal midwifery association strengthening. Canadian Association of Midwives’ Knovember, Montreal, Quebec, Canada, October 2020.

Poster Presentations

1. Fraser N, Sutton D, Mattison CA, Gignac M. Use of Medication and Complementary and Alternative Therapies in Arthritis. Toronto Western Research Institute Research Day, Toronto, ON, Canada, 9 November 2006.
2. Gignac M, Backman C, Badley E, Davis A, Lacaille D, Mattison CA, Montie P. Tooling up for early OA: Measuring Participation in life roles. Canadian Arthritis Network conference, Winnipeg, MB, Canada, 2006.
3. Mattison CA, Backman C, Davis A, Badley E, Lacaille D, Montie P, Gignac M. Measuring participation and satisfaction with life roles among individuals with osteoarthritis. University Health Network Research Day, Toronto, Ontario, Canada, October 2008.
4. Mattison CA, Fiorentino R, Chamberlain J. Strengthening health systems through the Level of Fistula Care Framework. McMaster University Faculty of Health Sciences Research Plenary, Hamilton, ON, Canada, 10-12 May 2011.
5. Mattison CA. The economic viability of birth centres in Ontario. McMaster University Faculty of Health Sciences Research Plenary, Hamilton, Ontario, Canada, 20-22 May 2014.

Published abstracts

1. Gignac MAM, Davis A, Badley EM, Backman C, Lacaille D, Montie P, **Mattison CA**. Social Role Participation in Arthritis: Measuring What Matters. *Arthritis & Rheumatism*. 2007. 56 (Suppl), S50.
2. Backman C, Gignac MAM, Badley E, Davis A, Koehn C, Lacaille D, **Mattison CA**, Montie P. Participation: A conceptual framework to guide research. *Canadian Journal of Occupational Therapy (Conference Supplement)*. June 2006. 73, S27.

Service Roles

Facilitator, Anti-racism monthly lunch n' learn, McMaster Midwifery Research Centre (2020 - present)

Reviewer. BHSc (Honours) Program Supplementary Applications (2020 - present)

International coach, Factors affecting the uptake of malaria prevention strategies among pregnant women in Birere sub-county, Isingiro district: Implications for effectiveness of malaria control, MicroResearch (2019 - present)

Student representative, Health Policy PhD Executive Committee, McMaster University (2014 - 16)

New Frontiers steering committee member, Centre for Health Economics and Policy Analysis
New Frontiers in Health Policy Research Conference, McMaster University (2015 - 16)

Curriculum Vitae

NAME: **Patricia S. McNiven**

HOME: 147 Chedoke Ave, Hamilton, ON, L8P 4P2
(905) 518 9355

BUSINESS: McMaster University, Midwifery Education Program,
HSC 4H24, 1280 Main St West, Hamilton, ON L8N 3Z5
(905) 525-9140 ext 26654
mcnivenp@mcmaster.ca

CLINIC: Community Midwives of Hamilton, Practice Partner
356 Main St W, Hamilton, ON, L8P 1K2
(905) 546-5444

EDUCATIONAL BACKGROUND:

Degrees

PhD - Doctor of Philosophy (1996)
MSc - Master of Science (1991)
BScN - Bachelor of Science of Nursing (1989)

1996 **Doctor of Philosophy**
University of Toronto
Thesis: *A randomized trial of the effect of an early labour assessment
program on the rate of caesarean section.*
Supervisor: Dr JI Williams

1993 **Midwifery Integration Project**
Michener Institute for Applied Health Sciences
Toronto, Ontario

1991 **Master of Science**
University of Toronto
Thesis: *A work sampling study of the amount of time the average labour
and delivery nurse spends in supportive care activities.*
Supervisor: Dr E Hodnett

1989 **Bachelor of Science of Nursing**

Award Recipient: Association of Ontario Midwives – Lifetime Achievement Award 2020

Courses Taken

ALARM SOGC (April 2015; instructor)
AOM: Emergency Skills (renewed annually; instructor)
NRP: Neonatal Resuscitation Program (renewed annually)
Fetal Health Surveillance in Labour (2006)
MORE Ob (September 2005; core team)
STABLE: Transporting Newborns the STABLE Way (March 2005)
ALSO: Advanced Life Support in Obstetrics (1996, instructor 1997)
Faculty Development Seminars in Health Economics and Health Policy (1998)
CPR (renewed every 2 years)

Licences

1994	Registered Midwife
1995	AOM ESW Instructor
1997	ALSO Instructor
2009	ALARM Instructor

CURRENT STATUS

Associate Professor, Full time, special category
Midwifery Education Program, Department of Family Medicine

Editor-in-Chief: *The Canadian Journal of Midwifery Research and Practice*
National Peer-Reviewed publication of the Canadian Association of Midwives

Member, Active Staff (Midwife) * medical LOA Jan 2020
Department of Family Medicine; St. Joseph's Healthcare
Department of Obstetrics & Gynaecology, Hamilton Health Sciences

Practice Partner, Community Midwives of Hamilton

PROFESSIONAL ORGANIZATIONS

College of Midwives of Ontario
Association of Ontario Midwives
Society of Obstetricians and Gynaecologist of Canada
Canadian Association of Midwives
International Confederation of Midwives

EMPLOYMENT HISTORY

- 2003 - 2019 **Associate Professor**, Department of Family Medicine
McMaster University
- 2005 **Senior Midwife**, Inukjuak
Centre de Santé Inuulitsivik
- 1995 - 2003 **Assistant Professor**, Department of Family Medicine
McMaster University
- 1993 - 1995 **Lecturer**, Department of Family Medicine
McMaster University
- 1995 - 1997 **Team Member: Consultant**
World Health Organization/CIDA
Healthy Cities Project, St. Petersburg, Russia
- 1994 **Guest Tutor**, Part time: Midwifery Program
Michener Institute of Applied Health Sciences
- 1994 - 1997 **Council Member**, Professional
College of Midwives of Ontario
- 1991 **Teaching Assistant**, Research: Conceptualization and Design,
Graduate Department of Nursing
University of Toronto
- 1990 **Obstetrical Nursing Instructor**, Centennial College,
Course Instructor, Nursing, Centennial College

SCHOLARLY AND PROFESSIONAL ACTIVITIES

Peer Reviewer for National and International Journals: Birth, CMAJ, JWH
Co-Author, The Guide to Teaching & Learning ebook, open access
Cochrane Systematic Reviews, Protocol Reviewer
Primary Care Advisory Committee on Research, Evaluation and Leadership Projects, Ontario
Ministry of Health
SSRC Grant Application Reviewer
CIHR Clinical Trials Unit External Reviewer
External Reviewer: Cochrane Pregnancy and Childbirth Group
MRC Grant Application Reviewer
MRC Grant Application Reviewer
NHRDP Grant Application Reviewer

September 21, 2020

Consultant

2016	University of Manitoba, Midwifery Education Program
2007	Health Canada, Midwifery in Iqaluit, report (available)
2006	New York University, CNM program, Conversion of Curriculum to PBL
2007	Consultant, Dunnville Hospital: A review of midwifery relations
2005	Health Canada, Midwifery in Nunavik, report available
2003 - 2006	Educational Consultant, Aboriginal Midwifery Training Program, Six Nations
2004 - 2005	Medical Management Consultant, Medfall - Review of Clinical Care and Professional Relations at GGH
2003	Consultant re Midwifery Legislation, Government of the NWT
2003 - 2010	Expert - Chart Review, Rogers, Moore
2001 - 2010	Midwife Research Advisory Network, International Congress of Midwives
2000	Evaluation Consultant, PLEA Review, College of Midwives of Ontario

AREAS OF INTEREST

Research

Educational Research
Perinatal Research,
Low Risk Obstetrical Clinical Trials International Health
Evaluation of Midwifery

Teaching

Assessment of Clinical Competence
Problem-Based Learning in Midwifery Education
Faculty Development
Clinical Preceptors
Women's Health, Teaching across cultures
Distance Education

Professional

Inter-professional Relationships
Clinical Excellence
Professional Stress Management
Development and Use of Clinical Protocols
Professional Behaviour

COURSES TAUGHT (5 YEARS)

2005-19 Maternal Newborn Pathology	Course Coordinator and Tutor
2010-16 Clinical Issues	Lead Faculty and tutor
2005-19 Normal Childbearing	Tutor
2005- 18 Complications and Consultations	Tutor

RESEARCH FUNDING

Principal Investigator

McNiven P, Kaufman K, Enkin M, and Keller J. The Maternal Optimality Measurement Study. Proposal for validation. The Hamilton Health Sciences Corporation Foundation. 1998 - 2000 (\$17,207)

McNiven P. Hodnett E, Williams J, Kaufman K, & Hannah M. Feasibility Study for a Multi-Centre Randomized Trial of the Effect of an Early Labour Assessment Program on the Rate of Cesarean Delivery. Perinatal Nursing Research Unit, University of Toronto. 1993-95 (\$15,000)

McNiven P. Ontario Ministry of Health Research Fellowship. Ontario Ministry of Health. 1992-94 (\$27,000)

Co-Investigator

Amster, E (Principal Investigator) Bracken, K; Redwood-Campbell, L; Zazulak, J; **McNiven, P**; Niec, A; Kafiriri, L. (Co-investigators). The Morocco-Canada Network for Maternal and Infant Health: Determining Research Priorities and a Framework for Action. (20,000) 2018

McDonald,S. (Principal Investigator) K Bracken, M Brouwers, E Pullenayegum, V Taylor, W Sword, H McDonald, V Mueller, **P. McNiven** (Co-investigators) An innovative web-based tool to prevent excess weight gain during pregnancy and consequent maternal and infant obesity. (The Consequences Study) HAHSO (179,103.) 2011.

Klein MC, Fraser W, Kaczorowski J (Principal Investigators) Brant R, Dore S, Hall W, Komelsen J, Lindstrom K, Liston R, **McNiven P**, Saxell L (Co-Investigators). Determining the attitudes of women and maternity care providers toward birth: Conflict, confusion and concordance, Canadian Institutes of Health Research (\$543,600) 2006.

Wathen CN, MacMillan HL, Freeman C (Principal Investigators) **McNiven P**, et al (Co-Investigators). Professional Education for Responding to Violence against Women: Review of Current practices in Ontario's Health Sector, Ontario Women's Directorate: Violence against Women Prevention Innovations Fund (\$125,000) 2005-2006

Kasperski J (Principal Investigator), Levitt C, **McNiven P**, Price D (Co-Investigators). Babies Can't Wait: Primary Care Obstetrics in Crisis, Canadian Primary Health Care Transition Fund

September 21, 2020

(\$61,230) 2005

Kasperski J (Principal Investigator), Kaczorowski J, Levitt C, **McNiven P**, (Co-Investigators). Actively Building Capacity in Interdisciplinary Primary health Care Research: Models of Collaborative Health Care Research Centres. Canadian Primary Health Care Transition Fund (\$1,573,000) 2004 - 2006

PUBLICATIONS

Peer Reviewed Journal Articles

Mathewson C, Espin S, Van Lieshout R, Dore S, **McNiven P**. Understanding the Childbirth Experiences of Childhood Sexual Abuse Survivors: A Phenomenological Study. *The Canadian Journal of Midwifery Research and Practice*, 2018; Vol 17 (2) p10-17

Klein MC, Kaczorowski J, Hall WA, Fraser W, **McNiven P**, et al. Birth Technology and Maternal Roles in Birth: Knowledge and Attitudes of Canadian Women Approaching Childbirth for the First Time. *J Obstet Gynaecol Can*; 2011;33(6):598-608

McNiven P, Klein M, Baradaran N, Tomkinson J, Hearps S & Saxell L, Midwives' Belief in Normal Birth: The Canadian Survey of Maternity Care Providers' Attitudes toward Labour and Birth. *The Canadian Journal of Midwifery Research and Practice*, 2011; Vol 10(2) p11-21.

Klein MC, Kaczorowski J, Hall WA, Fraser W, **McNiven P**, et al. The Attitudes of Canadian Maternity Care Practitioners toward Labour and Birth: Many Differences but Important Similarities. *J Obstet Gynaecol Can* 2009;31:827-40.

Kaufman K, **McNiven P**, Schmuck ML, Sharpe M, Soderstrom B. Graduates' Views of the Midwifery Education Program. *The Canadian Journal of Midwifery Research and Practice*, 2006;

Sternberg C, **McNiven P**. Midwifery care for women with a prior cesarean birth: A survey of Ontario midwifery practices. *The Canadian Journal of Midwifery Research and Practice*, 2003; Vol 2(1), p 10-14.

McNiven P. Kaufman, K. & Enkin, M. (2002) Measuring Birth Outcomes: Validating the perinatal outcome index. *Canadian Journal of Midwifery Research and Practice*, 2002; Vol 1(2), p 9-14.

McNiven P. Kaufman, K. & McDonald, H. (2002) Innovation in Midwifery Curriculum: The Problem-based Learning Approach. *British Journal of Midwifery*, 10(12)p 751-55.

McNiven P. & Robertson, A. (2001) Critical Incident Stress in Midwifery. *Association of Ontario Midwives Journal*, Winter, Vol 7-4.

September 21, 2020

McNiven P., Williams, J.I., Hodnett, E., Kaufman, K., Hannah, M. (1998) A Randomized controlled trial of an early labor assessment program. *Birth*; 25(1),p 5-10.

McNiven P. Roch, B. & Wall, J. (1994) Meconium-stained amniotic fluid: What do midwives need to know. *Modern Midwife*, 4(7), p.17-20.

McNiven P. O'Brien-Pallas, L.L. & Hodnett, E. (1993) Work sampling revisited: A technique for understanding nursing work. *Canadian Journal of Nursing Management*, 6(1), p 20-23.

McNiven P. & Hodnett, E. & O'Brien-Pallas, L.L. (1992) Supporting women in labor: A work sampling study of the activities of labor and delivery nurses. *Birth*, 19(1), p.3-8.

Reports and Commentaries

McNiven P (2009) Iqaluit Midwifery Gathering: Promoting, Supporting and Strengthening Inuit Midwifery, Inuit Nunaat Midwifery Gathering. Health Canada

McNiven P (2007) First Nunavik Midwifery Gathering: A Gathering of Elders and Midwives in Inukjuak, Nunavik. Health Canada: ISBN 978-0-9783246-2-9

McNiven P. Kaufman, K. & McDonald, H. (2001) Commentary on the Term Breech Trial. *Canadian Journal of Anaesthesia*; May.

Journal Abstracts & Book Reviews

McNiven P (2001) Book Review: Post-War Mothers: Childbirth Letters to Grantly Dick-Read. *Association of Ontario Midwives Journal*; Summer, vol 7-2.

McNiven P (2001) Book Review: Post-War Mothers: Childbirth Letters to Grantly Dick-Read. *Journal of the Women's Health Office*, Faculty of Health Sciences, McMaster University

Peer Reviewed Presentations

Wilson K & **McNiven P.** (2017) PBL Online and Distance Learning for Midwifery Students. *31st International Confederation of Midwives Triennial Congress*. Toronto, July oral.

McNiven P. Baradaran N, Tomkinson J, Hearps S, Saxell L, Kaczorowski J, Klein MC (2010) Attitudinal Differences toward labour and birth among Canadian midwives. *10th International Normal Birth Conference*, Vancouver, July. Oral

McNiven P. Baradaran N, Tomkinson J, Saxell L, Klein MC (2010) Midwives' belief in normal birth: The Canadian Survey of maternity care provider's attitudes toward labour and birth. *55th American College of Nurse Midwives Annual Meeting & Exposition, Washington, June.* Oral

McNiven P. & Kaufman K (2002) Midwifery Education & Regulation of the Profession: Clinical Competence: How is it Best Assessed? *Second Annual Canadian Association of Midwives, Vancouver, October.* Oral

Sternberg C & **McNiven P.** (2002) Midwifery Care for Women with a Prior Caesarean Birth: A Survey of Ontario Practices; *Second Annual Canadian Association of Midwives, Vancouver, October.* Oral

McNiven P. Kaufman K, McDonald H. (2002) Problem-based learning in Midwifery Education. *International Congress of Midwives 26th Triennial Congress, Vienna, April.* Oral

McNiven P. Kaufman K, McDonald H & Malott A. (2002) Clinical Competence: How is it Best Assessed? *International Congress of Midwives 26th Triennial Congress, Vienna, Oral*

McNiven P. Kaufman K, Enkin M & Keller J. (2000) Measuring Perinatal Outcomes for Low Risk Women: The Canadian Perinatal Outcome Index. *Eighth International Conference for Maternity Care Researchers, Glasgow, September.* Oral

Walsh A, Wakefield J, Hutchison B, **McNiven P.** Kollek D. The Development of a Formal Mentorship Program. *Workshop at the Family Medicine Forum, National Meeting of the College of Family Physicians of Canada. Ottawa, 2000.*

Walsh A, Wakefield J, Hutchison B, **McNiven P.** Kollek D. The Development of a Formal Mentorship Program. *Education Rounds, McMaster University, Hamilton, June 2000.*

Walsh A, Wakefield J, Hutchison B, **McNiven P.** Kollek D. The Development of a Formal Mentorship Program. *Association Of Canadian Medical Colleges Annual Meeting, Whistler, BC April 2000.*

Invited Presentations

McNiven P. Management of Shoulder Dystocia. *A Day in Low Risk Obstetrics: Challenges in Family-Centred Maternity Care, Hamilton, February 2005*

McNiven P. Management of the Unexpected Breech. *A Day in Low Risk Obstetrics: Challenges in Family-Centred Maternity Care, Hamilton, February 2003*

McNiven P. Early Labour Assessment and Dystocia: Applying Research to Care. *ACNM/CAM Clinical Symposium, Toronto: Oct 2001.*

September 21, 2020

McNiven P. Postpartum Hemorrhage. *Department of Family Medicine Workshop, St Joseph's Hospital, Hamilton, April 2001.*

McNiven P. Prevention. Recognition and Management of Dystocia. *ALSO Providers Course, McMaster University, March 2001.*

ADMINISTRATIVE RESPONSIBILITIES

Ongoing

2007 Editor-in-Chief, the Canadian Journal of Midwifery Research and Practice
2017 Member, Student Workload Review Committee (report attached)
2006 Faculty Development Lead
2006 Department Education Coordinator, Midwifery Education Program
2006 Faculty teaching assignment coordinator, Midwifery Education Program
2016 Member, Placement Committee, Midwifery Education Program
2005 Lead, Preceptor Development, Midwifery Education Program
2003 Conference Planner, Annual Scientific Meeting. The Canadian Association of Midwives
2001 Member, Midwife Research Advisory Network, International Congress of Midwives
2007 Abstract reviewer, ICM Triennial International Conference
1993 Interviewer for Midwifery Education Program

Completed

2018 Internal Reviewer, Department of Family Medicine, Promotion & Tenure
2013-16 Elected Member, McMaster Board of Governors
2014-16 Member of Senate, McMaster University
2015 Coordinator, Dutch Midwife Exchange and Conference (report attached)
2014 Member, McMaster University, Search Committee, University President
2013 Member, McMaster University, Search Committee, Assistant Dean of the MEP
2013 Member, McMaster University, Building and Planning Committee
2013 Member, McMaster University, Surgical Assist Program
2012 Internal Reviewer, Department of Family Medicine, Promotion & Tenure
2006 Member, Selection Committee, Dorothy C Hall Chair in Primary Health Care Nursing
2006 Member, Subcommittee to review gender issues in health science education
2006 Member, Subcommittee to develop an assessment tool for gender and equity issues
2005 Acting Assistant Dean, Midwifery Education Program
2006 Member, Curriculum Committee, OMEP
2006 Member. Admissions Committee, McMaster MEP
2000, 2002 Planner: May Cohen Lectureship
1998 - 2005 Chair, Curriculum Committee, Midwifery Education Program
1998 - 2002 Planner: Women in Health Science Evening
1998 - 2001 Member, Search Committee for Chair, Bachelor of Health Sciences Program
1998 - 2001 Member, Search Committee for Chair, Eli Lily Chair in Women's Health
1997 - 2002 Member of the Women's Health Office Executive
1997 - 2002 Interviewer for MD Education Program
1997 - 2002 Interviewer for Physiotherapy Program

September 21, 2020

1997 - 2000 Member, Mentorship Committee, Department of Family Medicine

Other Work

Mentor and Co-tutor, Midwifery Education Program, new faculty (3)
PhD Thesis Committee member, (1) 2009
MSc Thesis Committee member, (3) 2011,
MSc Thesis Supervisor, (2) 2016, 2019
Train simulated patients for teaching and exams
Review the PLEA examinations for the College of Midwives of Ontario
Developed College of Midwives of Ontario guidelines for professional behaviour (1997)
Developed College of Midwives of Ontario Sexual Abuse Prevention Plan (1996)
Develop innovative OSCE stations, TOSCA and Clerkship exams
Member of the Health Science Education Committee (6 mo, 2000, 2005)
Placement Coordinator for Community Practice (1997 - 2002)
Academic Forum Planning Committee, Department of Family Medicine (1997 - 1998)
Newsletter Committee, Department of Family Medicine (1997 - 1998)

Personal Development in Education:

Attend Annual Midwifery Education Consortium Faculty Retreat (annual 1998 - 2019)
Member of Dept Fam Med Faculty Group: Our Role as Educators
Attend Ethics Workshop: E. Bereza "Tyranny of Absolutes vs Abuses of Causticity:
Enhancing Ethics in Health Care (Dec 2001)
Attend: R. Runte "Assessment of Student Learning: How to Build better Multiple Choice
Tests" (July 2001)
Attend: Faculty Development Workshop: The Difficult Learning Situation (2001)
Attend: Teaching Bioethics in the Health Sciences 4 day workshop (2000)

Professional Development

2001 - 2019 CAM Annual Conference
Day in Perinatology (annual)
CPR & NRP (annual renewal)
ALARM or Emergency Skills (every year)

Updated 2021 Jan 15

Kate Demers

NAME Kate Demers

ADDRESS Midwifery Education Program, McMaster University
1280 Main Street West
Health Sciences Centre, 4H24
Hamilton, Ontario
Canada, L8S 4K1
Telephone: 905-525-9140 ext 26654
Email: kdemers@mcmaster.ca

EDUCATIONAL BACKGROUND

Degrees and Diplomas

2014	MMID, Midwifery, University of Sheffield, Sheffield
2009	BHSC, Midwifery, McMaster University, Hamilton, Canada
2002	BSc, Biology, McMaster University, Hamilton, Canada

Qualifications, Licensures and Certifications

2009	Registered Midwife, College of Midwives of Ontario, Ontario, Canada
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CURRENT STATUS AT MCMASTER

2018 - 2021	Assistant Professor, Obstetrics and Gynecology, Contractually Limited, Health Sciences
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PROFESSIONAL ORGANIZATIONS

2016	Canadian Association of Midwifery Educators
2009	College of Midwives of Ontario
2009	Association of Ontario Midwives
2009	Canadian Association of Midwives
2009	Society of Obstetricians and Gynecologists of Canada

EMPLOYMENT HISTORY

University Appointments

2021 - 2024	Assistant Professor, Obstetrics and Gynecology, Contractually Limited, Faculty of Health Sciences
2018 - 2021	Assistant Professor, Obstetrics and Gynecology, Contractually Limited, Faculty of Health Sciences
2018	Assistant Clinical Professor, Family Medicine, Part Time, Faculty of Health Sciences
2015 - 2018	Assistant Clinical Professor, Family Medicine, Part Time, Faculty of Health Sciences
2012 - 2015	Assistant Clinical Professor (Adjunct), Family Medicine, Part Time, Faculty of Health Sciences

Academic

2011 - 2018	Sessional Instructor, McMaster University, Midwifery Education Program, Hamilton, Ontario, Canada
2011	Teaching Assistant, McMaster University, Midwifery Education Program, Hamilton, Ontario, Canada

Clinical

2018 - present	Lead Midwife, Crown Point Midwives, Expanded Midwifery Scope Model, Ontario, Canada
2009 - present	Midwife, Community Midwives of Hamilton, Hamilton, Ontario, Canada

SCHOLARLY AND PROFESSIONAL ACTIVITIES

Journal Referee

2017 - present	Journal Referee, Canadian Journal of Midwifery Research and Practice
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Abstract Review

2019	Conference Abstract Peer Reviewer, Canadian Association of Midwives
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Peer Review Activities

2020	Workshop, Participant Professor Hippo workshop
2020	Participant, A day in coaching and mentorship
2019	Research Member, McMaster Midwifery Research Centre (MMRC) Fellow Member
2019	Workshop, Clinical educator workshop, participant

AREAS OF INTEREST

Clinical

1. Normal labour progress
2. Expanded Midwifery Care Models (EMCM)

Research

1. Systematic review
2. Health services
3. Knowledge translation

Teaching

1. Midwifery education

COURSES TAUGHT

Undergraduate Teaching

Midwifery

- 2014 Jul - 2021 Jun Preceptor, Clinical Skills, Normal Childbearing, week (7)
- 2013 Jul - 2020 Jun Coordinator, Midwifery the Profession, year (7)
- 2013 Jul - 2020 Jun Instructor, Midwifery the Profession, year (7)
- 2019 Jul - 2020 Jun Preceptor, Interprofessional Placement, Elective, student per placement (8)
- 2019 Jul - 2020 Jun Tutor, Clerkship, year (1)
- 2014 Jul - 2019 Jun Preceptor, Clinical Skills, Maternal and Newborn Pathology, week (4)
- 2014 Jul - 2019 Jun Preceptor, Clinical Skills, Clerkship, week (4)
- 2012 Jul - 2019 Jun Preceptor, Clinical Skills, Complications and Consultations, week (5)
- 2016 Jul - 2019 Jun Speaker, Teaching Session, Advanced Clinical Skills II, occasion (2)
- 2017 Jul - 2019 Jun Tutor, Complications and Consultations, year (2)
- 2014 Jul - 2019 Jun Tutor, Normal Childbearing, year (6)
- 2014 Jul - 2017 Jun Interviewer, Admissions, occasion (2)

2013 Jul - 2014 Jun Examiner, Observed Structured Clinical Examination, occasion (1)

Undergraduate Medical Clerkship

2018 Jul - 2020 Jun Presenter, Teaching Session, Obstetrics & Gynecology, occasion (5)

Postgraduate Teaching

Family Medicine and its subspecialties

2016 Jul - 2018 Jun Instructor, Clinical Skills, session (9)

Obstetrics & Gynecology and its subspecialties

2019 Jul - 2020 Jun Presenter, Academic Half Day/Core Curriculum, presentation (1)

Other

Continuing Education

2019 Jul - 2020 Jun Member, Planning Committee, year (1)

2019 Jul - 2020 Jun Speaker, occasion (1)

Faculty Development

2016 Jul - 2020 Jun Workshop Participant, occasion (8)

Additional Educational Contributions

Additional Teaching

2019 - present Clinical Preceptor – Crown Point Expanded Midwifery Care Model (1)

2019 - present Instructor – Learner in Difficulty Workshop (1)

2016 - present Instructor, Neonatal Resuscitation Program, Canadian Pediatric Society (1)

2016 - present Instructor, Fetal Health Surveillance in Labour Program, Champlain Maternal Newborn Regional Program (1)

2010 - present Clinical Preceptor – Community Midwives of Hamilton (1)

CONTRIBUTIONS TO TEACHING PRACTICE

Course/Curriculum Development

- | | |
|----------------|---|
| 2019 - present | Planning committee, Curriculum Development (e-modules, workshop content and assessment) Point of Care Ultrasound for Primary Maternity Care, Health Science Continuing Education Course |
| 2019 - present | Planning committee, Curriculum Development, Contraception, Health Science Continuing Education Course |
| 2018 - present | Co-lead, Course development, MIDWIF 1G03, Midwifery the Profession II |

Leadership

- | | |
|----------------|---|
| 2019 - present | Academic Leadership Program, McMaster Faculty of Health Sciences, Program for Faculty Development |
|----------------|---|

RESEARCH FUNDING

Grants Peer Reviewed (Primary Investigator's name is the first name listed)

- | | |
|---------------------|---|
| 2020 Apr - 2021 Sep | Demers, K., Darling, E., Outcomes of midwifery-led early loss clinic. Mentored Midwifery Research Grant., Grant, \$4,000.00 |
| 2020 Mar - 2021 Feb | Beth Murray-Davis., Other Investigators: Angela Reitsma, Liz Darling, Kate Demers Collaborators: Carol Cameron, Anne Malott, CIHR: Operating Grant: Spread and Scale of Existing Community-Based Primary Healthcare and eHealth Innovations, Grant, \$65,624.00 |
| 2020 Jan - 2021 Jan | Anne Malott, Beth Murray-Davis, Emma Seager, Kate Demers, Priority Areas for Learning and Teaching (PALAT) Grant: Standardized Formative Evaluation in Midwifery Clinical Education., Grant, \$3,606.75 |

LIFETIME PUBLICATIONS (Principal Author is the first name on each of the entries below)

Peer Reviewed Contributions to Books

1. Demers K. Comprehensive Midwifery: An Interactive Approach to the Theory and Evidence for Practice: Normal Pregnancy, Birth, Postpartum and Newborn Care, 2nd Edition. Transition to Extruterine Life.. Murray-Davis B, Hutton EK, Wainman B. editors (2017) McMaster University: Hamilton. <https://gumroad.com/bcw>.

PRESENTATIONS AT MEETINGS

Invited Presentations

1. Demers, K. Senior preceptor workshop Midwifery Education Program, McMaster University Hamilton, Ontario, Canada. Mar 12, 2020.

2. Demers, K. Knowledge Translation introduction to research methods and critical appraisal. Title was 'Knowledge Translation': Using 'informed choice discussions' to achieve shared decision making. Hamilton, Ontario, Canada. Mar 4, 2020.
3. Costescu, D., Darling, L., Abdel-Fattah, M., Demers, K. Pre-Conference Workshop: Focus on Intrauterine Contraception for Midwifery Practice Canadian Association of Midwives Conference, Halifax NS. Oct 23 2019. Halifax, Nova Scotia, Canada.
4. Demers, K., Abdel-Fattah, M. Midwifery considerations for Sexual and Reproductive Health McMaster Midwifery Student Union Conference. McMaster University, Hamilton, ON. Oct 7, 2019. Hamilton, Ontario, Canada.
5. Demers, K. Expanded Midwifery Care Model: interprofessional collaboration to develop, implement and evaluate services for urban families. McMaster Midwifery Research Symposium, Hamilton, ON. Mar 26 2019. Hamilton, Ontario, Canada.

Contributed Peer Reviewed Presentations

1. Demers, K. Expanded Midwifery Care Model: Medical Abortion Association of Ontario Midwives Conference, Markham, ON. May 8 2019. Markham, Ontario, Canada.

ADMINISTRATIVE RESPONSIBILITIES

2020 Mar - present	Member, planning committee and course development, Induction of labour in midwifery practice working group.
2020 Feb - present	Member, Indigenous Health Initiative curriculum and working group
2018 - present	Member, Curriculum committee Midwifery Consortium

Division/Department

2018 - present	Member, Member, Midwifery Consortium Faculty Council, Midwifery Education Program, McMaster University
2018 - present	Member, Member, Course Coordinators Committee Midwifery Consortium, Midwifery Education Consortium

Hospital

2019 - present	Member, Midwifery steering group for development of Alongside Midwifery Unit
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CURRICULUM VITAE

NAME: Helen Christine McDonald

HOME ADDRESS: 177 Edgemont St. South
Hamilton, ON
L8K 2J1

Tel: (905) 544 – 1401
Cell: (905) 512 – 6049

WORK ADDRESS: McMaster University
Midwifery Education Program
HSC 4H24
1280 Main Street West
Hamilton, ON
L8S 4K1

Tel: (905) 525 9140 ext 26654

Email address: mcdonal@mcmaster.ca

EDUCATIONAL BACKGROUND:

Midwifery Integration Project 1993
Michener Institute for Applied Health Sciences, Toronto

MHSc (Clinical Practice) 1989
McMaster University, Hamilton, Ontario

Registered Midwife 1971
Sydney, Australia, 1971

Registered Nurse 1969
Sydney, Australia

CURRENT STATUS AT McMASTER

Associate Professor, Midwifery Education Program

PROFESSIONAL ORGANIZATIONS

Canadian Association of Midwifery Educators
College of Midwives of Ontario
Association of Midwives of Ontario
Canadian Association of Midwives
Society of Obstetricians and Gynecologists of Canada

Curriculum vitae – Helen McDonald

EMPLOYMENT HISTORY

Associate Professor, Midwifery Education Program Department of Family Medicine, McMaster University	2003 -
Assistant Professor, Midwifery Education Program Department of Family Medicine, McMaster University	1995-2003
Sessional Teacher, Midwifery Education Programme McMaster University	1993-1995
Midwife, community practice, Hamilton	1994 - 2017
Midwifery Implementation Co-ordinator Ministry of Health, Ontario	1991
Clinical Instructor, School of Nursing McMaster University	1986-1989
Registered Nurse Hamilton Health Sciences, McMaster Campus	1979-1994

SCHOLARLY AND PROFESSIONAL ACTIVITIES

Journal Referee

Canadian Journal of Midwifery Research and Practice Oxford University Press	2004 - 2010 2007
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College of Midwives of Ontario

Executive council member	2001-2003
Fitness to Practice Committee (chair)	2001-2003
Disciplinary Hearing, panel member	2001
Council member, Disciplines Committee	2000-2003
Disciplinary Hearing, panel member	2003

Hamilton Health Sciences, Department of Obstetrics and Gynecology

Head, Midwifery Services	2006 - 2012 1994-2012
Obstetric Quality Assurance Committee	1994-2012
Obstetric Practice Committee	2007-2012

St Joseph's Healthcare, Department of Family Medicine

Head, Midwifery Services	2011-2015 1994-2010
Maternal and Infants Steering Committee	2011-2015
Maternal and Infants Operations Committee	2011- 2015
Acting Head Midwifery Services	2010- 2011

Curriculum vitae – Helen McDonald

Consultations and case reviews

College of Midwives of Ontario, midwifery review, report	2108
Tremblay, Bois, lawyers: case review, report	2016
Government of Newfoundland and Labrador, Consultation, Implementation of Midwifery in Newfoundland and Labrador	2012- 2013
College of Midwives of Ontario, midwifery review and report	2011
St Michael's Hospital, Midwifery Head and Division Review	2010
West Lincoln Memorial Hospital, Obstetric Department Review	2009
Guelph General Hospital, Obstetric and Midwifery Department Review	2004
St. Michael's Hospital, Toronto: case review, report, recommendations	2004
Rosenberg & Weir, lawyers: case review, report	2003
R. Harper, lawyer: expert opinion	2003
St. Michael's Hospital, Toronto: case review, report, recommendations	2002

GRANTS AND AWARDS

Excellence in teaching. Canadian Association of Midwives, 2016

Lifetime Publications

Peer reviewed journal articles

Feng YY, Yu ZM, van Blyderveen S, Schmidt L, Sword W, Vanstone M, Biringer A, McDonald H, Beyene J, McDonald SD. "Gestational weight gain outside the 2009 Institute of Medicine recommendations: novel psychological and behavioural factors associated with inadequate or excess weight gain in a prospective cohort study". *Accepted January 11, 2021 BMC Pregnancy & Childbirth PRCH-D-20-01858.*

Stearns JC, Simioni J, Gunn E, McDonald H, Holloway AC, thibane L, Mousseau A, Schertzer J, Ratcliffe EM, Rossi L, Surette MG, Morrison KM, Hutton EK. Intrapartum antibiotics for GBS prophylaxis alter colonization patterns in the early infant gut microbiome of low risk infants. *Sci Rep.* 2017 Nov 28;7(1):16527. Doi: 10.1038/s41598-017-16606-9.

Simioni J, Hutton EK, Gunn E, Holloway AC, Stearns JC, **McDonald H**, Mousseau, Schertzer JD, Ratcliffe EM, Thabane L, Surette MG, Morrison KM. A comparison of intestinal microbiota in a population of low-risk infants exposed and not exposed to intrapartum antibiotics: The baby and microbiota of the intestine cohort study protocol. *Pediatrics BMC.* Nov 2016;16:183. DOI: 10.1186/s12887-016-0724-5.

Murray-Davis B, **McDonald H**, Cross-Sudworth F, Ahmed R, Simioni J, Dore S, et al. Learning from adverse events in obstetrics: Is a standardized computer tool an effective strategy for root cause analysis? *J Obstet Gynecol Can.* 2015 Aug;37(8):728-35.

Kapadia MZ, Gaston A, Van BlyderveenS, Schmidt L, Beyene J, **McDonald H**, et al. Psychological antecedents of excess gestational weight gain: a systematic review. *BMC Pregnancy Childbirth.* 2015 May 2;15:107. Doi:10.1186/s12884-015-0535-y.

Kapadia MZ; Gaston A, Van Blyderveen S, Schmidt L, Beyene J, **McDonald H**, McDonald S. Psychological factors and trimester specific gestational weight gain: A systematic review. *J Psycho Obstet Gynecol.* 2015;36(1):15-22. Doi: 103109/0167482X.2014.993311. Epub 2014 Dec 26.

Curriculum vitae – Helen McDonald

McDonald SD, Pullenayegum E, Bracken K, Chen AM, **McDonald H**, Malott A, Hutchison R, Haley S, Lutsiv O, Taylor V, Good C, Hutton E, Sword W. Comparison of midwifery, family medicine and obstetric patients' understanding of weight gain during pregnancy: a minority of women report correct counseling. *J Obstet Gynaecol Can* 2012;34(2):129-135.

Murray-Davis B, McNiven P, **McDonald H**, Malott A, Elarar L, Hutton EK. Why home birth? A qualitative study exploring women's decision making about place of birth in two Canadian Provinces. *Midwifery* 2012;28:576-581.

Darling EK, **McDonald H**. A meta-analysis of the efficacy of ocular prophylactic agents used for the prevention of gonococcal and chlamydial ophthalmia neonatorum. *J Mid Womens Health* 2010;55(4):319-27.

Malott AM, Murray-Davis B, **McDonald H**, Hutton E. Midwifery care in eight industrialised countries: how does Canadian midwifery compare? *J Obstets Gynecol Canada* 2009;31(10):974-80.

McNiven P, Kaufman K, **McDonald H**. A problem based learning approach to midwifery. *British J Mid* 2002;10(12):751-5.

McNiven P, Kaufman K, **McDonald H**. Innovation in midwifery curriculum: The problem based learning approach. *British J Midwifery* 2002;10(12):751-5.

McDonald HC, Kaufman K. Practice protocol review: postdates protocol. *Association of Ontario Midwives J* 2001;7(1):26-7.

McNiven P. Kaufman K. **McDonald H**. Campbell DC. Best evidence in anesthetic practice: Prevention: planned Cesarean delivery reduces early perinatal and neonatal complications for term breech presentations. *Can J of Anaesth* 2001;48(11):1114-6.

McDonald HC. Protocol for the prevention of latex allergy. *Association of Ontario Midwives J* 2000;6(2):21-4.

McDonald HC. Coroner's report on baby Azzopardi: Death of a baby. *Association of Ontario Midwives J* 1998;4(1):11-3.

Kaufman K, **McDonald HC**. (1988) A retrospective evaluation of a model of midwifery care. *Birth* 1988;15(2):95-99.

Commentary

McDonald HC Commentary: Use of evidence based leaflets to promote informed choice in maternity care: randomised controlled trial in everyday practice. *Evidence-based Obstetrics & Gynecology* 2002;4(4).

McNiven P, Kaufman K, **McDonald HC**. Prevention: planned Cesarean delivery reduces early perinatal and neonatal complications for term breech presentations. *Can J Anesthesia* 2001;48(11):1114-6.

Unpublished Reports

Curriculum vitae – Helen McDonald

Kaufman K, **McDonald H**. Implementing midwifery in Newfoundland and Labrador.

McDonald HC. Intrapartum interventions: a comparative study of midwife and physician care. Masters research project, McMaster University, Hamilton, Ontario:1989.

Books

Wainman B, **McDonald H**, Murray-Davis B. Pharmacology Revealed. An e-book for midwives. Hamilton, ON: The e-Book Foundry @ McMaster University; 2013.

Murray-Davis B, **McDonald H**, McNiven P, Wainman B. Physical Assessment of the Well Woman and Newborn: An Enhanced E-Book for Midwives. Hamilton, ON: The e-Book Foundry @ McMaster University; 2014.

Murray-Davis B, Hutton EK, Wilson K, Wainman B, editors. Comprehensive Midwifery: An Interactive Guide to the Theory & Evidence of Practice: Management of Complications arising in Pregnancy, Birth, Postpartum and Newborn Care. 1st ed. Hamilton, ON: The e-Book Foundry @ McMaster University; 2019. 621 p.

Presentations

Invited

McDonald HC. Oxytocin: tips and tricks. Association of Ontario, Induction of Labour. February 2015.

McDonald HC, Murray-Davis B. Tiny, perfect baby? Association of Ontario Midwives, Annual General Conference, 2013

Contributed

Murray Davis B, **McDonald HC**, Reitsma A, Couborough M. Choosing Home or Hospital: The findings from the Ontario choice of birthplace survey. Canadian Association of Midwives Conference, 2012.

Duran-Snell D, **McDonald HC**. Advanced suturing for maternity care providers. (presentation, workshop) Canadian Association of Midwives Conference, 2012.

McDonald HC. Oxytocin update. Association of Ontario Midwives Annual Conference, 2011.

Murray Davis B, Wilson K, **McDonald HC**. Best practice for Midwifery prescribing. Association of Ontario Midwives Annual Conference, 2011.

McDonald HC. Water, water everywhere: the use of water in labour and birth. St. Joseph's Healthcare Day in Perinatology, Hamilton, 2010

Murray Davis B, Hutton E, Malott A, **McDonald H**, McNiven P, Kryzanasuskas O. Keeping Homebirth Safe: Screening criteria used by midwives: A Literature Review. Canadian Association of Midwives Conference, Vancouver BC, October 7, 2010.

Curriculum vitae – Helen McDonald

McDonald HC. Epidural analgesia in labour. Association of Ontario Midwives Annual Conference, 2009.

McDonald HC. Oxytocin for induction of labour. Association of Ontario Midwives Annual Conference, 2009.

McDonald HC. Tipping point: reducing the rate of caesarean section. Association of Ontario Midwives Annual Conference, 2007.

McDonald HC. Hot topics in Obstetrics. Association of Ontario Midwives Annual Conference, 2006.

Angle P, **McDonald HC.** Debate: “Epidural anaesthetic should be recommended to all nulliparous women in labour” MIRU Annual Conference, Toronto, 2005.

McDonald HC. Hot topics in Obstetrics. Association of Ontario Midwives Annual Conference, 2005.

McDonald HC. Having babies at home. St Joseph’s Healthcare Annual Day in Low Risk Obstetrics, 2005.

McDonald HC. Independent midwifery practice in Canada. 6th World Conference Perinatal Medicine, Osaka, Japan, 2004.

McDonald HC. Suturing. Association Ontario Midwives Annual General Meeting, Toronto, 2003. (workshop).

McDonald HC. Epidural management. Association Ontario Midwives Annual General Meeting, Toronto, 2003. (workshop).

McDonald HC. Induction of labour - indications and management. Association Ontario Midwives Annual General Meeting, Toronto, 2003. (workshop).

McDonald HC. Laboratory tests. College of Midwives of Ontario, 2001.

McDonald HC. Prescription of drugs by midwives in Ontario. College of Midwives of Ontario, 2001.

McDonald HC. Evidence based midwifery practice. College of Midwives of Ontario, 2001.

McDonald HC. The words we use: language and its effect on women in labour and delivery. St. Joseph’s Hospital Low Risk Birthing Conference, Hamilton, February 2000.

Smedstad K, **McDonald HC.** Midwives and anaesthetists. Combined Grand Rounds Winnipeg Health Sciences Centre, St. Boniface Hospital Winnipeg, Manitoba. June 1999.

McDonald HC. Cord blood gas analysis - routine or selective? Obstetrical Rounds, Scarborough Grace Hospital, Scarborough 1999.

McDonald HC. Research issues in midwifery practice. Association of Ontario Midwives Annual General Meeting, Toronto. May 1998.

McDonald HC. Quality assurance strategies in midwifery practice. Association of Ontario Midwives Annual General Meeting, Toronto, May 1998

Curriculum vitae – Helen McDonald

McDonald HC. Designing Practice Protocols. Association of Ontario Midwives Annual General Meeting, June 1997.

McDonald HC. Induction of Labour. Association of Ontario Midwives Annual General Meeting, Toronto, June 1996.

McDonald HC. Supporting the Perineum. Family medicine (obstetrics) rounds, St. Joseph's Hospital, Hamilton, May 1996.

McDonald HC. Evidence based practice. Academic Department of Family Medicine Rounds. St Joseph's Hospital, May 1996.

McDonald HC. Gestational Diabetes: to screen or not to screen, Clinical Dept. OBGYN Rounds, St Joseph's Hospital, April 1996.

McDonald HC. Continuity of Caregiver. St. Joseph's Hospital Day in Perinatology, Hamilton , October 1995.

McDonald HC. Catheterisation. Michener Institute for Applied Health Sciences, Toronto, March 1993.

McDonald HC. Coping with pain in labour: medicated and non-medicated methods. West Care Educators Committee First Annual Day in Perinatology, 1992.

McDonald HC. Crisis situations in labour and delivery. Welland County Hospital Outreach Day, 1992.

Midwifery:

McDonald, HC. Midwives and Public Health Nurses, Brantford Public Health Unit, Brantford, Ontario, 1994.

McDonald, HC. The McMaster Midwifery Service, National Invitational Conference on Midwifery Research and Service, 1992.

McDonald, HC. Midwifery Today and Tomorrow, Grey-Bruce Regional Health Centre, 1992.

McDonald, HC. The future integration of midwives into Obstetrical Care. St. Joseph's Health Centre Perinatal Outreach Program London, 1992.

McDonald, HC. Midwifery Integration and Implementation. Oxford County Board of Health, Woodstock, 1992.

McDonald, HC. Update on Midwifery. Royal Victoria Hospital Perinatal Outreach Day, Barrie, 1992.

McDonald, HC. Midwifery Integration, Soldiers Memorial Hospital, Orillia, 1992.

McDonald, HC. Creating a New Self-regulating profession for an ancient practice. University of Toronto, School of Continuing Education, Toronto, 1992.

Other:

Curriculum vitae – Helen McDonald

McDonald HC. Induction of labour. Workshop Coordinator, Association of Ontario Midwives, Toronto, 2016, 2017, 2018.

McDonald HC. Developing scenarios in problem-based learning. The Summer Institute. McMaster University, June 2011.

McDonald HC. Developing scenarios in problem-based learning. The Summer Institute. McMaster University, June 2010.

McDonald HC. Health resources: midwifery in Canada. Health in Canada: Caring for the future. McMaster University, January 2010.

McDonald H, Bennett N. Professional behaviour. Preceptor Conference, Midwifery Education Program, Ryerson University, March 2010.

McDonald HC, Malott A. Teaching on the fly: a workshop for advanced preceptors. Midwifery Education Preceptor Workshop, Ryerson University, Toronto, 2007.

Walsh A, **McDonald HC.** Teaching on the fly: a workshop for clinical teachers. McMaster University Faculty Development Workshop, McMaster University, Hamilton, 2007.

ADMINISTRATIVE RESPONSIBILITIES:

Academic:

2015 – present Chair, Police Records Check Panel, Faculty of Health Sciences, McMaster University

2015 – present Chair, Professionalism Advisory Group Panel, Faculty of Health Sciences, McMaster University

2012 – present Member, Professionalism Working Group, Faculty of Health Sciences, McMaster University

2012 – present Member, Professionalism Committee, Michael de Groote School of Medicine, McMaster University

2012 Member, Search Committee, Chief of Family Medicine, St Joseph's Healthcare/ McMaster University

2007 - 2012 Faculty adjudicator, (Academic Integrity), McMaster University

2002 - 2014 Chair, Admissions Committee, Midwifery Education Program Consortium, (McMaster University, Ryerson University, Laurentian University)

2007 - Academic Review Committee, Midwifery Education Program, McMaster University

2006 Acting Director Midwifery Education Program (3 months only), McMaster University

2005 Member, Search Committee, Director, Midwifery Education Program, McMaster University

2000 Member, Search Committee, Director, Midwifery Education Program, McMaster University

1993 - present Interviewer, Midwifery Education Program, McMaster University, McMaster University

Curriculum vitae – Helen McDonald

Clinical:

- 2011 - 2015 Head, Midwifery Services, St Joseph's Healthcare
- 2010 - 2011 Acting Head, Midwifery Services, St Joseph's Healthcare
- 2011 - 2015 Maternal and Infants Steering Committee, St Joseph's Healthcare
- 2007 - 2012 Maternal Newborn Operations Committee, St Joseph's Healthcare
Pediatric Newborn Operations Committee, St Joseph's Healthcare
- 2006 - 2012 Head, Midwifery Service, Department Obstetrics and Gynecology,
Hamilton Health Sciences, Hamilton ON
Obstetric & Gynecology Operations Committee, Hamilton Health Sciences
Newborn Screening Working Group, Hamilton Health Sciences
Hypoglycemia Working Group, Hamilton Health Sciences
- 1997-2007 Maternal Newborn Operations Committee, St Joseph's Healthcare, Hamilton ON
Pediatric Newborn Operations Committee, St Joseph's Healthcare, Hamilton ON
- 1994 – 2010 Head, Midwifery Services, Department of Family Medicine, St Joseph's Healthcare,
Hamilton ON

Curriculum vitae – Helen McDonald

Other Courses Taken

2015	Fetal Health Surveillance Instructor course
2013 – 2016	MORE – OB
2010	Ethical issues in the clinical setting. Program for Faculty Development. McMaster University
2007	Neonatal Resuscitation Instructor Certificate
2007	Advanced Life Support Obstetrics (faculty)
2005-2007	MORE – OB
2005	Advanced Tutor Training
2006	ALSO: Advances in Life Support Obstetrics (faculty)
2006- ongoing	ALARM: Advances in Obstetric Risk Management (faculty)
2005	PCA and Epidural Pumps
1994- present	NRP: Neonatal Resuscitation Programme, renewed yearly
1994- present	CPR: Cardiopulmonary Resuscitation (Healthcare Provider), renewed 2 nd yearly

Ann Kathleen Wilson, BA BHSc MSc RM

11749 Ilderton Road
Ilderton ON N0M 2A0
Ph: 519-630-9670
Email: wilsonak@mcmaster.ca

Curriculum Vitae

Education:

- 1975: Bachelor of Arts (Honours) in English Language and Literature
University of Western Ontario, London, Ontario
Dean's Honours List: 1972; 1973; 1974; 1975
Recipient of Helen MB Allison Gold Medal for highest standing in graduating year of Honours English programme
- 1996: Baccalaureate in Health Sciences (Midwifery)
McMaster University, Hamilton, Ontario
Dean's Honours List: 1994; 1995; 1996
Graduated with distinction
- 2016: Master of Science
Health Science Education
McMaster University, Hamilton, Ontario.
Dissertation: "Challenges and Opportunities in Clinical Assessment and Evaluation by Preceptors in the Ontario Midwifery Education Program"

Professional Registrations/Certificates:

- 1996 – 2016: General registrant midwife, College of Midwives of Ontario
Registration number 1085
- 2016 – present: General registrant midwife, inactive, College of Midwives of Ontario
- 1996 - present: Member, Association of Ontario Midwives
- 1997 - present: Associate Midwife member, Society of Obstetricians and Gynaecologists of Canada

Academic Appointments:

- 2009 – 2014: Lecturer, Department of Obstetrics and Gynecology,
Schulich School of Medicine and Dentistry, Western University, London,
Ontario
- 2013 – 2018: Assistant Clinical Professor, Department of Family Medicine, McMaster
University, Hamilton, Ontario.

2018 - : Assistant Professor, Department of Obstetrics and Gynecology, McMaster University, Hamilton, Ontario

Research Activity:

2011 – 2017: Co-investigator for “Is Close Proximity to Emergency Obstetrical Services a Prerequisite for Safety”

2020 - Adjunct member, McMaster Midwifery Research Unit

Past and Current Positions:

1997 - present: Partner and registered midwife, Thames Valley Midwives, London, Ontario

2003 - 2011: Chief, Department of Midwifery, London Health Sciences Centre/St. Joseph’s Health Care, London; includes a position on the Medical Advisory Committees and MAC Executive of both hospitals, and on the City-Wide Perinatal Leadership Council; responsibilities include quality of care monitoring and credentialing of midwives, as well as providing midwifery perspectives on key issues affecting perinatal care, and participation in hospital accreditation cycles.

2011 – 2013: Chief, Department of Midwifery, London Health Sciences Centre (post consolidation of maternal-child services in London)

2011 – 2016: Head Midwife, Woodstock General Hospital, Woodstock, Ontario

Professional Organizations and Significant Roles:

1997 - 2000: Member, Association of Ontario Midwives Board of Directors; Chair, Midwifery Program Committee

1998 - 2004: Midwifery representative, Medical Human Health Resources Working Group, Thames Valley District Health Council, London, Ontario

1998 – 2002: Head, Midwifery Division, Department of Family Medicine, St. Joseph’s Health Care, London.

1998 & 2002: Midwifery representative on the accreditation team for perinatal care, St. Joseph’s Health Care, London.

2001: Midwifery participant for the National Recommendations Writing Workshop, a multidisciplinary team formed to draft the summary report of the proceedings of the National Conference on The Future of Maternity Care in Canada, held in London, November 24 – 25, 2000.

2002 - 2004: Midwifery representative, Regional Perinatal Services Project Coordinating Committee, a multidisciplinary group from Southwestern Ontario formed to develop “AT RISK: Perinatal Services in Southwestern Ontario”, a report outlining the status of perinatal services in the region and identifying strategies to ensure access to appropriate care in the region.

- 2002 - 2003: Chair, Hospital Relationships Task Force, formed by the Association of Ontario Midwives to assist in the development of strategies to improve the relationships across Ontario between registered midwives and their local hospital staffs, including nurses, physicians, administration and allied personnel
- 2003 - 2004: Chair, VBAC Task Force, formed by the Association of Ontario Midwives to form a clinical practice guideline for midwifery care of women with previous caesarean section
- 2002 - 2005: Representative of the Association of Ontario Midwives to the Ontario Medical Association Antenatal Records Review Committee
- 2004 - 2006: Chair, Clinical Practice Guidelines Working Group for the Association of Ontario Midwives; tasked to review current clinical practice guidelines and/or develop guidelines for midwifery practice; 5 clinical practice guideline reviews/guidelines developed
- 2000 – 2012: Associate Midwife member of Clinical Practice – Obstetrics Committee, Society of Obstetricians and Gynaecologists of Canada; authored “Maternal Transport Policy”, published in October 2005
- 2007 – 2012: Ontario Regional Representative, RM Advisory Committee, Society of Obstetricians and Gynaecologists of Canada
- 2007 – 2009: Member of the Primary Health Care Priority Action Team for the Southwest Local Health Integration Network
- 2005 - 2009: Co-chair, and Core Team Member for the MORE^{OB} (Managing Obstetrical Risk Efficiently) Patient Safety Initiative for the London city hospitals.
- 2004 - present: Peer reviewer for the Canadian Journal of Midwifery Research and Practice
- 2007 – 2008: Data Quality Reviewer for the Ontario Midwifery Program (Ministry of Health and Long Term Care) and the Ontario Perinatal Surveillance System; reviewing data input integrity at midwifery practices across the province.
- 2014 – present: Consultant providing expert opinion for the College of Midwives of Ontario on complaints submitted to the College.
- 2015 – present: Midwifery representative on the Knowledge Assessment Team for Salus Global Inc., developing and assessing multiple choice items for the MORE^{OB} on line examination bank
- 2018: External reviewer for the Department of Midwifery, BC Women’s Hospital and St. Paul’s Hospital, Vancouver, BC
- 2018 – 2019: Midwifery representative on the SOGC Intrapartum Fetal Health Surveillance Guideline development team.

- 2019 - Peer reviewer for the Journal of Obstetrics and Gynaecology of Canada.
- 2020 - Board member, Canadian Association of Midwifery Educators (Vice President and Treasurer)

Clinical Teaching Positions and Roles:

- 2000: Clinical preceptor, Advanced Practice Nursing student, Athabaska University
- 2007: Clinical preceptor, Master of Nursing Science student, McMaster University
- 1997 - 2016: Clinical preceptor for the Midwifery Education Program (McMaster University, Laurentian University, Ryerson Polytechnic University)
- 2001 – present: Instructor and senior instructor for the Association of Ontario Midwives' Emergency Skills Workshop
- 2004 – 2016: Clinical preceptor of BSc in Nursing students from Western University, which included both observational and direct clinical experiences.
- 2005 – present: Instructor for the Neonatal Resuscitation Program through the Canadian Paediatric Society
- 2007 - present Clinical instructor and consultant to the International Midwives' Preregistration Programme, Ryerson University, Toronto
- 2015: Trainer with the College of Midwives of Ontario for intubation and umbilical vein insertion skills for currently registered Ontario midwives
- 2010 – 2018: Tutor/sessional faculty, McMaster University Midwifery Education Program and Ryerson University Midwifery Education Program
- 2018 – present: Assistant Professor, Dep't of Obstetrics and Gynecology, McMaster University Midwifery Education Program

Publications:
(Peer reviewed)

- Dore S, Ehman W and The Fetal Health Surveillance Working Group. No. 396-Fetal Health Surveillance: Intrapartum Consensus Guideline. JOGC 2020;3;316-348.
- Darling EK, Lawford K. Wilson AK, Kryzanasuskas M, Bourgeault I. Distance from home birth to emergency obstetrical services and neonatal outcomes: a cohort study. Journal of Midwifery and Womens Health 2019;64:170-178.
- Wilson K. Assessing "Breaking Bad News" Communication Competency in Midwifery Students. Canadian Journal of Midwifery Research and Practice. 2015: 14(1): 16-18, 24-30.
- Wilson K, Martel M-J. Maternal Transport Policy: SOGC Policy Statement. J Obstet Gynaecol Can 2005;27(10):956-958.

Wilson K. Vaginal birth after caesarean section and the issue of home birth. Canadian Journal of Midwifery Research and Practice. 2003; 2(1):7-9.

(not peer-reviewed)

Zenith KE, Wilson K. Midwives and medwives: An analysis of technology use among Canadian midwives. Canadian Journal of Midwifery Research and Practice. 2019;18(1):35-39

Texts:

Tyson H, Luong V, Wilson K. Pharmacology for Midwives: Text, Workbook and Distance Education Module.

Wilson K. "Anatomy and physiology of labour", "First stage of labour" "Pain and comfort measures" in: Murray Davis B, Hutton E, Wainman B, editors. Comprehensive midwifery: An interactive approach to the theory and evidence of practice. 2nd edition. Hamilton: McMaster University, 2017.

Wilson K. "Management of obstetrical emergencies" in: Murray Davis B, Hutton E, Wilson K, Wainman B., editors. Comprehensive midwifery: Management of complications arising in pregnancy, birth, postpartum and newborn Care. Hamilton: McMaster University, 2019.

Awards:

Canadian Journal of Midwifery Research and Practice:

2013: Contribution to the Journal as a peer reviewer

2015: Best educational paper

2017: Contribution to the Journal as a peer reviewer

Conference and Educational Presentations:

"Midwives and VBAC: Questions and Controversies": Association of Ontario Midwives Annual Conference "Debates in Midwifery...Implications for the Profession". Toronto ON, 2003.

"Meeting the Unique Needs of Amish and Mennonite Women": Canadian Association of Midwives/American College of Nurse Midwives "Bridging Borders" Conference. Calgary AB, 2004

"Operationalizing the AOM VBAC Guideline": Association of Ontario Midwives Annual Conference "Nurturing Normal Birth: Advancing Midwifery Skills". Kimberley ON, 2005.

"Approaches to Second Stage Management: A Midwifery Perspective": Resident Rounds, St. Joseph's Health Care. London ON, 2006.

"Catastrophic Uterine Rupture at Home: A Case Study": Canadian Association of Midwives Annual AGM and Conference. Ottawa ON, 2006.

- "Learning Low Risk: Midwifery Students In and Out of Hospital", Society of Obstetricians and Gynecologists of Canada Annual Clinical Meeting. Calgary AB, 2007.
- "Rural Homebirth in Two Ontario Midwifery Practices: Is Close Proximity to Emergency Obstetrical Services a Prerequisite for Safety?" With Michelle Kryzanasuskas. Canadian Association of Midwives, Annual AGM and Conference. Edmonton AB, 2010.
- "Cultural Sensitivity: Working with Amish and Mennonite Families": With Dr. Victoria Mok Siu. Schulich School of Medicine and Dentistry, Western University. London ON, 2010.
- "Rural Homebirth in Two Ontario Midwifery Practices: Is Close Proximity to Emergency Obstetrical Services a Prerequisite for Safety?" With Michelle Kryzanasuskas. Association of Ontario Midwives Annual Conference. Hamilton ON, 2011.
- "Centering Pregnancy": Southwestern Ontario Maternal, Newborn, Child and Youth Network Annual Perinatal Conference "Managing Risk in Pregnancy: Optimizing Outcomes". London ON, 2011.
- "Bringing Birth Home: Evidence and Perspectives": Southwestern Ontario Maternal, Newborn, Child and Youth Network 26th Annual Perinatal Conference. London ON, 2012.
- "Unique Cultural and Ethical Dilemmas in Burn Management and Complementary Therapies": Building partnerships in healthcare provision to the Amish and Mennonite communities: A Symposium. London ON, 2013.
- "PBL Online and Distance Learning for Midwifery Students" 31st International Confederation of Midwives Triennial Congress. Toronto ON, 2017.
- "Cognitive Apprenticeship, Situated Learning and Communities of Practice: A Pedagogy for Teaching and Evaluating Midwifery Students" Canadian Association of Midwifery Educators, Innovations and Research to Support Midwifery Education, November 14, 2017.
- "Feedback: What it is, what it means and how to do it" Canadian Association of Midwives Annual Conference, Gatineau QC, October 2018.

Updated 3 March 2021

Meredith Vanstone

ADDRESS

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Hamilton, Ontario L8P 1H6
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EDUCATIONAL BACKGROUND

Degrees and Diplomas

- 2012 PhD. Health Professional Education. Faculty of Health Sciences, University of Western Ontario, London, ON
- 2007 BA (Hons), Philosophy and Health Studies, McMaster University, Hamilton, ON

Other Specialized Training

- 2012-13 Postdoctoral Fellowship. Health Policy, McMaster University, Hamilton, ON

Current Status at McMaster

- 2019- Associate Professor, Department of Family Medicine, Faculty of Health Sciences
- 2016- 2019 Assistant Professor, Department of Family Medicine, Faculty of Health Sciences, McMaster University
- Associate member, Department of Health Research Methods, Evidence and Impact, McMaster University (Formerly Department of Clinical Epidemiology & Biostatistics)
- 2013-2016¹ Assistant Professor, Department of Clinical Epidemiology & Biostatistics, Faculty of Health Sciences, McMaster University

Professional Organizations

- 2017- present Canadian Association for Medical Education
- 2015-present North American Primary Care Research Association

¹ Parental leave: February 28, 2015 – February 26, 2016.

2015- present	Early Career Medical Educators (ECME)
2014-present	Health Technology Assessment International
2014-present	Canadian Health Human Resources Network
2014-present	Ontario Health Human Resources Network
2014-2017	Canadian Bioethics Society
2014-17	Canadian Association of Health Services and Policy Research
2014-16	Canadian Fertility and Andrology Society

EMPLOYMENT HISTORY

Academic

Consultations

2017- 2019	Preventing Violence across the Lifespan (PreVAIL) Network. Consultant to the Violence, Evidence, Guidance, Action (VEGA) project on pedagogical and practical issues pertaining to knowledge translation and education materials aimed at health professionals.
2015- 2018	Canadian Association for Drugs and Technologies in Health, external consultant on multiple health technology assessments regarding social and ethical methodology issues
2014	Health Quality Ontario, Expert Advisory Panel on diabetes education
2013	Program for Education Research and Development (H. Reiter, K. Dore) for report to external agency. Non-disclosure agreement in effect.
2013	Health Quality Ontario Expert Advisory Panel on community-based care for adult patients with type 2 diabetes
2013	Health Quality Ontario, Expert Advisory Panel on appropriate clinical indications for cataract extraction

SCHOLARLY & PROFESSIONAL ACTIVITIES

Grant and Personnel Committees

2014- present	Sex, Gender and Equity Working Group, Ontario Ministry of Health and Long-Term Care, Strategy for Patient Oriented Research Support Group
2014-18	Maternal-Child Screening Committee, Provincial Council for Maternal and Child Health

Executive positions

2014-2016 Executive member, Ethics & Law special interest group, Canadian Fertility and Andrology Society

Journal Reviewer

2019- present Associate Editor, Perspectives in Medical Education

2018-present Reviewer, BMC Pregnancy and Childbirth (1 Review)

2018-present Reviewer, Journal of Obstetrics and Gynecology (1 Review)

2017- present Reviewer, BMJ (1 Review)

2017-present Reviewer, BMC Medical Education (1 Review)

2016- present Reviewer, Medical Education (~ 3 Reviews)

2016- present Reviewer, Perspectives on Medical Education (2 Reviews)

2015- present Reviewer, Social Science and Medicine (~5 Reviews)

2014- present McMaster Health Forum (~4 Reviews)

2014- present Reviewer, International Journal of Gender, Science, and Technology (3 Review)

2014- present Reviewer, Canadian Journal of Diabetes (1 Review)

2013- present Reviewer, Healthcare Policy (3 Review)

2013- present Reviewer, BMC Medical Ethics (4 Reviews)

2013- present Reviewer, SAGE Open Medicine (1 Review)

2012- present Reviewer, Journal of Obstetrics and Gynecology Canada (~5 Reviews)

2011- present Reviewer, Reflective Practice (~3 Reviews)

2011- present Reviewer, Canadian Family Physician (~5 Reviews)

2011- present Reviewer, Advances in Health Science Education (3 Reviews)

2011- present Reviewer, Qualitative Health Research (~ 10 Reviews)

External Grant Reviews

2020 External Reviewer, Estonian Research Council (ETAg)

2020 External Reviewer, Canadian Institutes of Health Research, Mental Health and Substance Use Responses to COVID-19 grant; Covid Rapid Research grant

2020 External Expert Reviewer, The Netherlands Organisation for Health Research and Development (ZonMw)

- 2020 External Reviewer, Canadian Institutes of Health Research, Operating Grant EHSI Committee (45 hours)
- 2019 External Reviewer, Marsden Fund, Royal Society Te Aparangi. New Zealand.
- 2017-2019 External Reviewer, Canadian Institutes of Health Research, Doctoral Awards Committee B (30 hours each year)
- 2016 External Reviewer, Canadian Institutes of Health Research, Knowledge Synthesis Grant Committee (15 hours)

HONOURS and AWARDS

- 2020 Canadian Association of Medical Educators, Meridith Marks New Educator Award (\$1000)
- 2020 Canadian Association of Medical Educators, Certificate of Merit
- 2019 Canadian Association of Medical Educators, Early Career Medical Educator Champion Award
- 2018 Faculty of Health Sciences Award for Excellence in Graduate Supervision.
- 2017 Association of Medical Educators of Europe Research Paper Award for Vanstone, M., Grierson, L., Bracken, K., Baird, J. Observers, Disturbers and Team Members: medical student experiences of social power in the clinical learning environment. Association of Medical Educators of Europe. Helsinki, Finland. August 27, 2017
- 2010 Student Abstract Award, Canadian Bioethics Society (\$900)
- 2009-11 CIHR Training Award in Reproduction, Early Development and the Impact on Health. \$17,800/year
- 2009 Young Scholar Award, Engaging Reflection in Health Professional Education and Practice conference
- 2009 University of Western Ontario Research Travel Award (\$500)
- 2009 First Prize, Western Graduate Research Forum (Poster- Social Sciences, Arts or Humanities)
- 2008-09 SSHRC J.A. Bombardier Canada Graduate Scholarship- Master's Award (\$17,500)
- 2008-09 Ontario Graduate Scholarship (\$15,000- Declined)

COURSES TAUGHT

Undergraduate

Bachelor of Health, Aging and Society

- Sept-Dec 2018 Instructor. HLTH AGE 3I03- Independent Study in Health, Aging & Society. Black Feminist Approaches to Understanding Health Inequities. Department of Health, Aging and Society, Faculty of Social Sciences, McMaster University.

Jan- Apr 2013 Instructor. HLTH AGE 3B03- Research Methods II,. Department of Health, Aging and Society, Faculty of Social Sciences, McMaster University.

Bachelor of Arts and Sciences (Honours)

2016-17 Thesis Supervisor, 4A06 – Independent Study (1 Student)

Graduate

Graduate Programs in Health Sciences

2015 CIHR and OGS Scholarship Committee (MSc and PhD) Reviewer

2014, 18, 19 Faculty of Health Sciences Research Plenary (abstract reviewer, judge)

Health Research Methodology

2018 Spring Thesis Examiner, MSc (1 Candidate)

2016 Fall Lecturer, HRM 721, Fundamentals of Health Research and Evaluation Methods. Session (1/year)

2015 Winter Lecturer and evaluator, HRM Comprehensive Exam Seminar Session (1/year)

2015 Winter Lecturer, HRM 741, Introduction to Health Technology Assessment. Session (1/year)

2015 Winter Lecturer, HRM 721, Fundamentals of Health Research and Evaluation Methods. Session (1/year)

2015 Winter Tutor, HRM 721, Fundamentals of Health Research and Evaluation Methods. Session (1/year)

2014 Fall Lecturer and evaluator, HRM Comprehensive Exam Seminar Session (1/year)

2014 Reviewer, Student Publication Award

2014 Fall Lecturer, HRM 738, Health Policy Analysis. Session (1/year)

2014 Fall Lecturer, HRM 741, Introduction to Health Technology Assessment. Session (1/year)

2014 Fall Lecturer, HRM 721, Fundamentals of Health Research and Evaluation Methods. Session (1/year)

2014 Fall Tutor, HRM 721, Fundamentals of Health Research and Evaluation Methods. Session (2/year)

2014 Summer Tutor, HRM 721, Fundamentals of Health Research and Evaluation Methods. Session (2/year)

2013 Fall Lecturer, HRM 738, Health Policy Analysis. Session (1/year)

2013 Fall Lecturer, HRM 741, Introduction to Health Technology Assessment. Session (1/year)

2013 Fall Lecturer, HRM 721, Fundamentals of Health Research and Evaluation Methods. Session (1/year)

2013 Fall Tutor, HRM 721, Fundamentals of Health Research and Evaluation Methods. Session (1/year)

Health Policy

2020 Spring Comprehensive Exam Co-Chair, marker

2020 Winter Admissions Committee member

2019 Fall Instructor, HLTH POL 711 Doctoral Seminar (4/year)

2019 Fall Instructor, HLTH POL 798 Public Health Ethics.

2019 Winter Admissions Committee member

2019 Spring Comprehensive Exam Co-Chair, marker

2018 Spring Comprehensive Exam marker

2018 Winter Admissions Committee member

2018 Winter Instructor, HLTH POL/HSEUC 747 – Qualitative and Conceptual Research Methods. Session, (12/year)

2017 Spring Comprehensive Exam marker

2017 Winter Instructor, HLTH POL/HSEUC 747 – Qualitative and Conceptual Research Methods. Session, (12/year)

2017 Fall Lecturer, HLTH POL 711, Doctoral Seminar (1/year)

2016 Spring Comprehensive Exam marker

2015 Winter Lecturer, HLTH POL 747 – Qualitative and Conceptual Research Methods for Health Policy. Session (2/year)

2015 Winter Lecturer, HLTH POL 747 – Qualitative and Conceptual Research Methods for Health Policy. Session (1/year)

2015 Winter Lecturer, HLTH POL 711, Doctoral Seminar (1/year)

2014 Winter Instructor, HLTH POL 747 – Qualitative and Conceptual Research Methods for Health Policy. Session (12/year)

2014 Fall Facilitator, HLTH POL 750, Applied Social Theory for Health Policy. Session (12/year).

2014 Fall Lecturer, HLTH POL 711, Doctoral Seminar (1/year)

2014 Spring Comprehensive Exam marker

2013 Spring Comprehensive Exam marker

2013 Fall Lecturer, HLTH POL 711, Doctoral Seminar (1/year)

2013 Winter Co-Instructor, HLTH POL 747 – Qualitative and Conceptual Research Methods for Health Policy. Session (12/year)

Global Health

2014 Thesis Examiner, MSc, candidate (1)

Health Science Education

2019 Winter Thesis Examiner, MSc, candidate (1)

2018 Winter Instructor, HLTH POL/HSEUC 747 – Qualitative and Conceptual Research Methods. Session, (12/year)

2017, 2019 Admissions Committee Chair

2017 Winter Instructor, HLTH POL/HSEUC 747 – Qualitative and Conceptual Research Methods. Session, (12/year)

Clinician Educator Diploma

2018 Lecturer, Clinician Educator Diploma (1)

Graduate Programs outside of FHS

Health Management (School of Business)

2014 Reader, HM 730 Scholarly Paper (1 Student)

Institute of Health Policy, Management and Evaluation (University of Toronto)

2019 Thesis Examiner, PhD, candidate (1)

Contributions to Teaching Practice

Course/Curriculum Development

- 2020 Course developer and Instructor. Health Policy 798 “Public Health Ethics”. With doctoral student Manisha Pahwa, created a doctoral level reading course which examines the intersection of public health and health ethics. Co-created the course and delivered 8 sessions in Fall 2019.
- 2019 Course developer and Instructor. Gender Studies 704 “Critical Perspectives on Admissions in Health Professional Programs”. With master’s student Tahmina Shamsheri, conducted a master’s level reading course which critically examines the evidence and theory informing admission to health professional programs. Co-created course and delivered 6 sessions in Summer 2019.
- 2018 Course developer and Instructor. Health and Aging 3I03 “Black Feminist Approaches to Understanding Health Inequities”. With BA student Kayonne Christy conducted an undergraduate level reading course which used Black feminist theory to examine health inequities. Co-created course and delivered 8 sessions in Fall 2018.
- 2018 Course developer and Instructor. Health Policy 798 “Intersections of Health Policy and Health Professional Education”. With doctoral student Alice Cavanagh, created a doctoral level reading course which examines the organizational, regulatory, and educational policy influences of health professional education and practice. Co-created the course and will deliver 8 sessions in Spring 2018.
- 2016-2017 Course developer and Instructor. Health Sciences Education 747 “Qualitative and Conceptual Research Methods”. Adapted existing HLTH POL 747 qualitative research methods course to a hybrid format to serve an online MSc program. Created e-modules (24) and delivered 12 synchronous sessions.
- 2014-2015 Course developer and facilitator. Health Policy 750 “Applied Social Theory for Health Policy”. Created a survey course in response to identified need for a core course in the “Social Organization” stream of the program. Worked with colleagues to identify core topics. I created and coordinated the course and delivered 4/12 lectures.
- 2012-13 Course developer and instructor. HLTH AGE 3B03 “Research Methods II”. As a postdoctoral fellow, designed from scratch a mixed-methods research course to complement an existing introductory research methods course.

SUPERVISORSHIPS

Master’s

Health Research Methodology

- 2016-2017 Supervisor, course-based, Umair Majid, FT student, completed (1). Current status: PhD student, University of Toronto.

Health Science Education

- 2020-ongoing Supervisor, thesis-based, Cindy Quinton, PT student, in progress
- 2019- ongoing Supervisor, thesis-based, Simone Griffith, PT student, in progress
- 2017- 2019 Supervisor, thesis-based, Chante De Freitas, FT student, completed (1) Current status: Research Analyst, Adobe Canada
- 2017- 2019 Supervisor, thesis-based, Amanda Bell, PT student, completed (1) Current status: Regional Assistant Dean, Undergraduate MD Program, McMaster University.
- 2016- 2019 Supervisor, thesis-based, Emily Block, FT student, completed (1) Current status: Educational Developer, McMaster University.
- 2016- 2018 Supervisor, thesis-based, Laura Davey, FT student, completed (1) Current status, Operating Room Nurse, Fort MacMurray AB.
- 2016- 2018 Supervisor, thesis-based, Nicole Didyk, PT student, completed (1) Current status, Geriatrician, Grand River Hospital.

Doctoral

MD/PhD (Health Policy)

- 2017-present Supervisor, Alice Cavanagh, FT student, in progress (1)

Health Policy

- 2017-present Supervisor, Manisha Pahwa, FT student, in progress (1)
- 2020-present Supervisor, Alexandra Cernat, FT student, in progress (1)

Health Research Methodology

- 2015- 2019 Supervisor, Kristen Burrows, FT student, completed (1). Current status, Assistant Dean, Physician Assistant Education Program, McMaster University.

Postdoctoral

- 2021-2023 Supervisor, Monica Molinaro, Postdoctoral Fellow

SUPERVISORY COMMITTEES

Master's

Health Research Methodology

- 2019-present Supervisory committee member, Radha Sayal, FT student, on leave
- 2014-2016 Supervisory committee member, thesis-based, Sujane Kandasamy, FT student, completed (1) Current status: PhD student, McMaster University.

Health Science Education

- 2017 Reader, Independent Paper, Course-based, Adam Garber, PT student, completed (1)
- 2014- 2018 Supervisory committee member, thesis-based, Christine Sandor, PT student, completed (1). Current Status: Registered Midwife, Community Midwives of Hamilton.

Doctoral

Health Research Methodology

- 2020-present Supervisory committee member, Rebecca Correia, FT student, in progress
- 2018-2019 Independent Study second member, Sujane Kandasamy, FT student, completed(1)
- 2017- present Supervisory committee member, Sujane Kandasamy, FT student, in progress (1)
- 2016-2017 Independent Study supervisor, Amanda Baskwill, PT student, completed (1)
- 2016-2017 Independent Study supervisor, Yasir Rehman, FT student, completed (1)
- 2016-2017 Independent Study second member, Wojtek Wiercioch, FT student, completed (1)
- 2015- 2019 Supervisory committee member, Amanda Baskwill, PT student, completed (1)

Health Policy

- 2019- present Supervisory committee member, Amina Jabbar, FT student, in progress.
- 2016- present Supervisory committee member, Shawn Winsor, FT student, in progress (1)
- 2015-2019 Supervisory committee member, A. Firas Khalid, FT student, completed (1)

Health & Aging

- 2018-present Supervisory committee member, Jane Parry, FT student, in progress (1)

Other

- 2015-18 Supervisory committee member, Hazar Haidar, PhD Bioethics, Université de Montréal, completed. Current status: Postdoctoral fellow, McGill University.
- 2018- 2020 Supervisory committee member, Agnes Sebastian, MSc Institute of Health Policy, Management, Evaluation, University of Toronto. FT student, completed. Current status: medical student, university of Toronto
- 2016- present Supervisory committee member, Leichelle Little, PhD Health Professional Education, University of Western Ontario

Postdoctoral

- 2017- 2018 Supervisory committee member, Julia Bidonde, Health Policy, completed (1) Current status: Scientist, Norwegian Institute of Public Health

Other

RESEARCH FUNDING

- 2021 – 2024 Hillis, C (PI), Heddle, N., Arnold, D., Cook, R., Khalaf, D., Stanworth, S., Vanstone, M., Webert, K. Defining clinically important bleeding outcomes for clinical trials in hematological malignancies: perceptions of patients and health care providers.
Funding Source: Canadian Institutes of Health Research
Funding Amount: \$295,000
- 2021 – 2022 Mangin, D. (PI), Nicholson K, (Co-PI), Borhan S., Cossette B., Fortin M, Griffith L, Howard M, Queenan J, Stranges S, Terry A, Vanstone M., Williamson T. Understanding the accumulation of multiple chronic diseases and multiple prescribed medications and the influence on the experience of aging among adults and older adults in Canada.
Funding Source: Canadian Institutes of Health Research
Funding Amount: \$100,000
- 2021 Jan – 2021 Dec Naji, L. (PI), Violette, P., Randhawa, H., Vanstone, M. Exploring patients' and physicians' values and preferences regarding prostate cancer screening: A pilot and feasibility study.
Funding Source: Department of Family Medicine Pilot Funds.
Funding Amount: \$5,000
- 2021 Jan – 2021 Dec Siu, H. (PI), Akladios, F., Kristof, L., Vanstone, M. Identifying key recommendations for future public health emergencies in the long term care sector based on the initial Covid-19 Pandemic experience.
Funding Source: Department of Family Medicine Pilot Funds.
Funding Amount: \$5,000
- 2020 Nov – 2024 Oct McGillion, M (PI), Devereaux, P., (Co-PI), Scott, T. (Co-PI), Doyle, T (Co-PI), Peter, E (Co-PI), and the VISION 2 Team with European Commission Sub-Team which includes Vanstone, M.
SMILE: Optimising Smarter Inclusive Living Environments for ageing people within their circles of care. Horizon 2020 – Research and Innovation Framework Programme.
Funding Source: Horizon 2020 Team Grant: Canada-EU Smart Living Environments- Transitions in Care. Includes CIHR + Industry and European partners
Funding Amount: 9,278,277
- 2020 Sept- 2022 Aug McGillion, M (PI), Devereaux, P., (Co-PI), Doyle, T (Co-PI), Peter, E (Co-PI), Scott, D. (Co-PI) and the VISION 2 Team which includes Vanstone, M.
Vascular events in noncardiac surgery patients cohort evaluation study-2 (VISION-2).
Funding source: Canadian Institutes of Health Research
Funding amount: 673, 200
- 2020 Sept – 2022 Aug O'Toole, D. (PI), Inglis, G., Weresch, J., Vanstone, M. Overflowing Inbox: Resident and educator perceptions on the educational importance of indirect patient care activities.
Funding Source: Family Medicine Associates
Funding Amount: \$56,000

2019 Nov – 2022 Oct	<p>Vanstone, M. (PI), Black, M., Darling, E., Lennox, R., McDonald, S., Murray-Davis, B., Patel, T., Shaw, E. Encouraging Informed decisions about cannabis use in pregnancy: Educational needs of women and prenatal care providers. Funding Source: CIHR with matched funds from Department of Family Medicine, MERIT Funding Amount: \$243,000</p>
2019 Nov – 2023 Jan	<p>Kimber, M. (Co-PI), <u>Vanstone, M.</u>, (Co-PI), Stewart, D (Co-PI), Wekerle, C., Martin-Hill, D., Dimitropoulos, G., Collin-Vezina, D. Preparing Providers to Recognize and Respond to Family Violence. Funding Source: Public Health Agency of Canada Funding Amount: \$749,870</p>
2019 Oct – 2022 Sept	<p>Abelson, J. (Co-PI), <u>Vanstone, M.</u> (Co-PI), Canfield, C., Forest, P-G., Leslie, M., Rowland, P. Examining patient partner and advisor roles in the Canadian health system: A mixed-methods policy analysis. Funding Source: Canadian Institutes of Health Research Funding Amount: \$329,104</p>
2019 Sept – 2021 Aug	<p>Cavanagh, A., MacMillan, H., <u>Vanstone, M.</u> Improving physician preparation to respond to patients who have experienced sexual violence. Funding Source: Physician Services Incorporated; Research Trainee Fellowship Funding Amount: \$50,000</p>
2018 Sept – 2020 Aug	<p>Waters, H., Walsh, A., Kam, A., Ladhani, M., Miklea, J., Pardhan, A., <u>Vanstone, M.</u> Optimizing feedback from direct observation of clinical performance: Learner feedback-seeking and avoidance behavior in four clinical settings. Funding Source: Royal College of Physicians and Surgeons of Canada; Medical Education Research Grant. Funding Amount: \$47,530.50</p>
2018 Sept – 2020 Aug	<p>Bracken, K., Levinson, A., Breakey, V., McAssey, K., McLeod, H., Grierson, L., <u>Vanstone, M.</u> An innovative e-learning approach to enhance knowledge transfer in Family Medicine Clerkship: A pilot project to inform development of an ambulatory clerkship. Funding Source: Family Medicine Associates Funding Amount: \$47,258</p>
2018 July – 2019 Dec	<p>Grierson L (Co-PI), <u>Vanstone M</u> (Co-PI), Siu H, Mountjoy M, Howard M, Guscott J, Baker A, Tong XC, Farag A. Understanding the impact of CFPC Certificates of Added Competence Funding source: Canadian College of Family Physicians Funding amount: \$99,996.00</p>
2018 May – 2019 April	<p>Richardson, J., Letts, L., Donnelly, C., Wojkowski, S., Chan, D., Sanford, S., Durocher, E., Miller, J., <u>Vanstone, M.</u>, Smith, J., Gravesande, J. Rehabilitation as a health strategy for persons with chronic conditions and associated issues of aging: A web-based application Funding Source: AGEWELL-MIRA Catalyst Program Funding Amount: \$50,000</p>

2018 Feb -2019 Jan	<p>Waters, H., Walsh, A., Miklea, J. <u>Vanstone, M.</u> Direct Observation: Learner perceptions and behaviours in seeking and avoiding feedback. Funding Source: Department of Family Medicine Pilot Fund Funding Amount: \$4,998</p>
2018 Feb -2019 Jan	<p>Patel, T., Shadd, J., Farag, A., <u>Vanstone, M.</u>, Grierson, L. Managing requests for hastened death: How can we educate physicians to provide high quality care for their patients, family members and themselves? Funding Source: Department of Family Medicine Pilot Fund Funding Amount: \$4,878.80</p>
2017 October -2020 Sept	<p>Lavis, J., and Abelson, J. (Co-Leads), Hurley J., Sweetman A., Mulvale G., Wilson M., <u>Vanstone M.</u>, Guindon E., Moat K., Grignon M., and B. Newbold. Harnessing evidence and values for health system excellence. Funding Source: Ontario Ministry of Health and Long-Term Care Health System Research Fund Funding Amount: \$2,087,999</p>
2017 Oct -18 Sept	<p>Abelson, J., Bond, K., Clifford, T., Schwartz, L., Tarride, J-E., <u>Vanstone, M.</u> Funding Source: CIHR Training and Modernization Start-Up Grant in Health Services and Policy Research. Public and Patient Engagement in Health Technology Management. Funding Amount: \$97,500.</p>
2017 Sept -19 Aug	<p><u>Vanstone, M.</u> (PI), Connelly, C.E., (Co-PI), Bell, A., Dore, K., Mountjoy, M., Walsh, A., Wong, A., Whyte, R. Unproductive, unprofessional, and abusive behaviours in the clinical workplace: The influence of working environment on the development of future health leaders. Funding Source: Michael G. DeGroote Health Leadership Academy. Funding Amount: \$20,000 with \$10,000 match from Michael G. DeGroote School of Medicine Undergraduate MD program.</p>
2017 Aug -19 July	<p>Burrows, K. (PI) & <u>Vanstone, M.</u> Essential knowledge elements of Physician Assistant Practice: First Steps to a CME Curriculum for an Emerging Profession. Funding Source: Continuing Health Science Education Program Research and Innovation Fund. Funding Amount: \$4210.</p>
2017 Aug -18 July	<p>Bell, A. (PI), Grant, C., <u>Vanstone, M.</u> Barriers to Medical Student Reporting of Mistreatment and Abuse. Funding Source: Canadian Association of Medical Educators Wooster Family Grant in Medical Education. Funding Amount: \$9809.</p>
2017 July -2019 June	<p>Cook, DJ (PI) & <u>Vanstone, M</u> (Co-PI). Compassionate end of life care in the ICU: Evaluating the scalability, transferability, affordability, sustainability and values of the 3 Wishes Project. Funding Source: Greenwall Foundation. Funding Amount: \$206,898 (USD).</p>

- 2017 July -19 June Darling EK (PI), Vanstone M (Co-PI), Hutton EK, Murray-Davis B, Ahmed R, Nussey L.
Exploring equitable access to midwifery care for people of low socioeconomic status: facilitators and barriers.
Funding Source: Association of Ontario Midwives Established Career Midwifery Research Grant.
Funding Amount: \$40,000.
- 2017 Jan- 19 March Vanstone, M. (PI)
HPV Testing for Cervical Cancer Screening: Women’s preferences and experiences.
Funding Source: Canadian Agency for Drugs and Technology in Health
Funding Amount: \$30,000.
- 2017 Feb -18 Jan Vanstone, M. (PI) Bell, A., Dore, K., Grierson, L., Kinzie, S., Mountjoy, M., Walsh, A.
Influence of Clerkship and Residency Structure on Medical Learner Mistreatment and Abuse.
Funding Source: Department of Family Medicine Seed Fund.
Funding Amount: \$5000.
- 2016 Apr – 18 Sept Lavis, J., (PI) Abelson, J., (Co-PI) Grignon, M., Guidon, E., Hurley, J., Mulvale, G., Sweetman, A., Vanstone, M., Wilson, M.
Harnessing Evidence and Values for Health System Excellence
Funding Source: Ontario SPOR SUPPORT Unit
Funding Amount: \$1, 250, 000
- 2016 April – 17 March Lavis, J., Abelson, J., Hurley, J., Sweetman, A., Mulvale, G., Wilson, M., Vanstone, M.
Harnessing Evidence and Values for Health System Excellence.
Funding Source: Government of Ontario
Funding Amount: \$436, 205
- 2016 Aug -17 July Baird, J. (PI), Bracken, K., Grierson, L., Vanstone, M.
The Experience of Power in Clinical Learning Environments.
Funding Source: Canadian Association of Medical Educators Wooster Family Education Grant.
Funding Amount: \$3650 with \$5000 match from Michael G. DeGroot School of Medicine Undergraduate MD program.
- 2015 March -18 April McDonald, S (PI), Beyene J, Cairney J, Schmidt L, Sword W, Van Blyderveen S, Vanstone M.
Understanding Excessive Pregnancy Weight Gain: A Consideration of Psychological and Other Determinants as a Prelude to Developing Interventions.
Funding Source: CIHR, Transitional Open Operating Grant.
Funding Amount: \$536,094.
- 2014 Sept -18 March M. Vanstone (PI), K. Dore, M. Sibbald, S. Monteiro, J. Sherbino, G. Norman.
Understanding clinical intuition: A qualitative examination of the use of intuitive reasoning by experienced physicians.
Funding Source: Royal College of Physicians and Surgeons of Canada Medical Education Research Grant.

Funding Amount: \$49,020

2014 July -18 June M. Vanstone (PI), M. Giacomini, L. Schwartz, J. Nisker.
Ethical considerations for health technology policy about non-invasive prenatal testing via fetal DNA in maternal blood.
Funding Source: CIHR, Ethics Catalyst Grant.
Funding Amount: \$98,293

Student scholarship funding secured with my supervision

2021 Sept - 2023 Aug Molinaro, M (Trainee), Vanstone, M (Supervisor)
Provider and patient experiences of health inequity in primary care: Navigating the entwinement of social needs.
Funding source: SSHRC Banting Postdoctoral Fellowship
Funding amount: \$140,000

2021- Sept – 2023 Aug Molinaro, M (Trainee), Vanstone, M (Supervisor)
Stories of health inequity and moral distress.
Funding source: SSHRC Postdoctoral Fellowship
Funding amount: \$90,000 (*Declined- cannot be held jointly with Banting*)

2021 Jan – 2024 Dec Cavanagh, A (Student), Vanstone, M (Supervisor)
Teaching Trauma: Supporting Canadian Trainee Physicians in Responding to Survivors of Sexual Violence
Funding Source: CIHR Frederick Banting and Charles Best Canada Graduate Scholarships
Funding Amount: \$105,000

2020 Sept – 2023 Aug Pahwa, M. (Student), Vanstone, M. (Supervisor)
Achieving equitable population-based lung cancer screening programs in Canada: An inquiry of social values and ethical considerations
Funding Source: CIHR Frederick Banting and Charles Best Canada Graduate Scholarships
Funding Amount: \$105,000

2019 Sept – 2022 Aug Burgess, R (Student), Vanstone, M (Supervisor)
The elephant in the room: The link between health professional and patient mistreatment in the Canadian health care system
Funding Source: CIHR Frederick Banting and Charles Best Canada Graduate Scholarships
Funding Amount: \$105,000

2014 Aug -15 July. Kandasamy, S. (Student), Vanstone, M. (Supervisor)
Understanding Six Nations grandmothers beliefs and cultural perceptions about pre and post-natal health behaviours.
Funding Source: Canadian Institutes of Health Research, Strategic Training Program in Reproductive, Early Development and In-Utero Health.
Funding Amount: \$11,900.

LIFETIME PUBLICATIONS

	<u>First Author</u>	<u>Senior Author</u>	<u>Co-Author</u>	<u>Total</u>
Book Chapters	1	1	2	4
Peer Reviewed Articles	21	26	43	90
Commissioned Reports to Government	6	3	3	12

Peer Reviewed

Contributions to Books

1. Burrows, K., Vanstone, M., Jones, I. (2020) Physician Assistants in Canada. *Introduction to the Health Workforce in Canada*. Bourgeault, I.L. (ed). Canadian Health Workforce Network, Ottawa. <https://www.hhr-rhs.ca/en/text.html>
2. Sandor, C., Murray-Davis, B., Vanstone, M., Bryant, C. (2019) The transition to clinical practice for new registrant midwives in Ontario, Canada. *Starting Life as a Midwife: An international review of transition from student to practitioner*. Gray, M., Kitson-Reynolds, E., Cummins, A. (Ed). Switzerland: Springer. Pp. 73-94.
3. O'Reilly, D., Campbell, K., Vanstone, M., Bowen, J., Schwartz, L., Assasi, N., & Goeree, R. (2015). Evidence-Based Decision-Making 3: Health Technology Assessment. In P. S. Parfrey & B. J. Barrett (Eds.), *Clinical Epidemiology* (Vol. 1281, pp. 417-441): Springer New York.
4. Vanstone, M., Kinsella, E.A., Nisker, J. (2014) . 'Diseases', 'defects', 'abnormalities' and 'conditions': Discursive tensions in prenatal screening. In Nash, M. (Ed.). *Reframing Reproduction: Conceiving Gendered Experiences*. Melbourne: Palgrave-MacMillan. pp. 54-68.

Journal Articles

1. Sebastian, A., Carroll, J., Vanstone, M., Clausen, M., Kodida R, Reble E, Mighton C, Shickh S, Aronson M, Eisen A, Elser C, Lerner-Ellis J, Kim R, Bombard Y. Widening the lens of actionability: A qualitative study of primary care providers' views and experiences of managing secondary findings from genomic sequencing. *European Journal of Human Genetics*. Accepted.
2. Christy, K., Kandasamy, S., Majid, U. Farrah, K., Vanstone, M. Understanding Black women's perspectives and experiences of cervical cancer screening: A systematic review and qualitative meta-synthesis. *Journal of Health Care for the Poor and Underserved*. In Press.
3. Takaoka, A., Tam, B., Vanstone, M., Clarke F, Hoad N, Swinton M, Toledo F, Boyle A, Woods A, Duan E, Heels-Ansdell D, Waugh L, Soth M, Rudkowski J, Alhazzani W, Perri D, Ligori T, Haeschke R, Zytaruk N, Cook D. Scale-up and sustainability of a personalized end-of-life care intervention: A longitudinal mixed-methods study. *BMC Health Services Research*. Accepted.
4. De Freitas C, Buckley R, Klimo R, Daniel J, Mountjoy M, Vanstone, M. Admissions experiences of aspiring physicians from low-income backgrounds. *Medical Education*. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/medu.14462>

5. Bidonde, J., Vanstone, M., Schwartz, L., Abelson, J. (2021). An institutional ethnographic analysis of public and patient engagement activities at a national health technology assessment agency. *International Journal of Technology Assessment in Health Care*. Accepted January 16 2021.
6. Baskwill, A., Vanstone, M., Dore, K. (2021). Identification of common features within massage therapists' professional identity. *Journal of Complementary and Integrative Medicine*. Accepted January 5, 2021.
7. Feng YY, Yu ZM, van Blyderveen S, Schmidt L, Sword W, Vanstone M, Biringer A, McDonald H, Beyene J, McDonald SD. (2021) Gestational weight gain outside the 2009 Institute of Medicine recommendations: novel psychological and behavioural factors associated with inadequate or excess weight gain in a prospective cohort study. *BMC Pregnancy & Childbirth* 21,70. <https://doi.org/10.1186/s12884-021-03555-5>
8. Haidar, H., Leclerc-Blain, J., Vanstone, M., Labarge, A., Bibeau, G., Ghulmiyyah, L., Ravitsky, V. (2021). A qualitative study of women and partners from Lebanon and Quebec regarding an expanded scope of non-invasive prenatal testing. *BMC Pregnancy and Childbirth*. 21:54. <https://bmcpregnancychildbirth.biomedcentral.com/articles/10.1186/s12884-020-03538-y>
9. Kandasamy, S., Vanstone, M., Colvin, E., Chan, T., Sherbino, J., Monteiro, S. "I made a mistake!": A narrative analysis of experienced physicians' stories of preventable error. (2021) *Journal of Evaluation in Clinical Practice*. Doi: 10.1111/jep.13531
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OTHER: Commentaries

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4. *Baird, J. & Vanstone, M.* (2017) Professionalism’s contextual nature: a call for compassionate, constructive responses. *Medical Education*. 51(7):678-679

Other: Editorships

Guest Editor, with E. Anne Kinsella. (2010) *Reflective Practice* 11(4), special issue on Engaging Reflection through the Arts in Health and Social Care.

Kinsella, E.A. & Vanstone, M. (2010) An international conference on Engaging Reflection in Health Professional Education and Practice: Emerging conversations on the arts in health and social care. *Reflective Practice*. 11(4): 409-416

Other: Technical Reports

1. Vanstone, M., Annis, R., Backo-Shannon, M., Charles, J., Clarke, L., Cowper-Fung, B., Fallis, G., Kaplan, D., Kiran, T., Mariano, C., Mehta, K., Newberry, S., O’Halloran, H., Paucha, P., Pham, T., Price, D., Schieck, D., Van Iersel, R., Young, J. Primary Care 2025: Capitalizing on rapid change to improve Ontario’s primary health care system. Report of the Primary Care 2025 working group to Ontario Health. Hamilton (ON): 2020 Aug 17. 34 p. Available from: <http://www.primarycare2025.com/whitepaper>
2. Grierson, L., Allice, I., Vanstone, M. (2020). Understanding the Impact of the CFPC Certificates of Added Competence. Accepted by the executive board of the College of Family Physicians of Canada, June 15, 2020.

3. Majid, U., Kandasamy, S., Arora, N., Vanstone, M. Patient Preferences, Perspectives and Experience: A Qualitative Evidence Synthesis. Pp.105-129. In *HPV Testing for Primary Cervical Cancer Screening: A health technology assessment*. Ottawa: CADTH; 2019 March. (CADTH Optimal Use Report, vol 7 no1b).
4. Vanstone, M., Cernat, A., Majid, U., Trivedi, F., de Freitas, C. Perspectives of pregnant people and clinicians on Non-Invasive Prenatal Testing (NIPT): A systematic review and qualitative meta-synthesis. *Ont Health Technol Assess Ser*. 2019 Feb 19. 19(5)1-38. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6398533/>
5. Vanstone, M. Patient Perspectives and Experience. In *HPV Testing for Primary Cervical Cancer Screening- Project Protocol*. Ottawa: CADTH; 2017 May (CADTH optimal use report; vol 7 no. 1a) https://www.cadth.ca/sites/default/files/pdf/OP0530_HP_V_Testing_for_PCC_Protocol.pdf
6. Kandasamy S, Khalid AF, Majid U, and Vanstone M. Prostate cancer patient perspectives on the use of information in treatment decision-making: a systematic review and qualitative meta-synthesis. *Ont Health Technol Assess Ser* [Internet]. 2017 May;17(7):1-32. Available from: <http://www.hqontario.ca/Evidence-to-Improve-Care/Journal-Ontario-Health-Technology-AssessmentSeries>
7. Vanstone, M., Rewegan, A., Brundisini, F., DeJean, D., Giacomini, M. 2015. Patient Perspectives on Quality of Life with Uncontrolled Type 1 Diabetes: A Systematic Review and Qualitative Meta-Synthesis. *Ont Health Technol Assess Ser* [Internet]. 2015 September: 15(17)1-29. Available from: <http://www.hqontario.ca/Portals/0/documents/eds/ohtas/fev-pancreas-islet-transplantation-1509-en.pdf>
8. Vanstone, M., Brundisini, F., Hulan, D., DeJean, D., Giacomini, M. Patient Experiences of Medication Adherence: A Systematic Review and Qualitative Meta-Synthesis. Ontario Health Technology Advisory Committee (OHTAC), Health Quality Ontario, January 2014.
9. Vanstone M., Giacomini M, Smith A, Brundisini F, DeJean D, Winsor S. How diet challenges are magnified in vulnerable or marginalized people with diabetes and heart disease: a systematic review and qualitative meta-synthesis. *Ont Health Technol Assess Ser* [Internet]. 2013 September;13(14):1-40. Available from: <http://www.hqontario.ca/Portals/0/Documents/eds/ohtas/full-report-qualitative-diet-modification-130906-en.pdf>
10. DeJean M, Giacomini M, Vanstone M., Brundisini F. Patient experiences of depression and anxiety with chronic disease: A systematic review and qualitative meta-synthesis. *Ont Health Technol Assess Ser* [Internet]. 2013 September: 13(16)1-34. Available from: <http://www.hqontario.ca/Portals/0/Documents/eds/ohtas/full-report-qualitative-patients-experience-depression-anxiety-cd-130906-en.pdf>
11. Winsor S, Smith A, Vanstone M., Giacomini M, Brundisini FK, DeJean D. Experiences of patient centredness with specialized community-based care: a systematic review and qualitative meta-synthesis. *Ont Health Technol Assess Ser* [Internet]. 2013 September; 13(17):1-34. Available from: <http://www.hqontario.ca/Portals/0/Documents/eds/ohtas/full-report-qualitative-patients-experience-patient-centredness-130906-en.pdf>
12. Brundisini F, Giacomini M, DeJean D, Vanstone M., Winsor S, Smith A. Chronic disease patients' experiences with accessing health care in rural and remote areas: a systematic review and qualitative meta-synthesis. *Ont Health Technol Assess Ser* [Internet]. 2013 September; 13(15):1-37. Available from: <http://www.hqontario.ca/Portals/0/Documents/eds/ohtas/full-report-qualitative-cd-patients-experience-accessing-health-care-130906-en.pdf>

OTHER: Media

Media coverage (including interviews) for: Vanstone, M., Toledo, F., Clarke, F., Boyle, A., Woods, A., Giacomini, M., Swinton, M., Saunders, L., Shears, M., Zytaruk, N., Rose, T., Hand-Breckenridge, T., Heels-Ansdell, D., Anderson-White, S., Sheppard, R., Cook, D.J. (2016) Narrative Medicine and Death in the ICU: Word Clouds as a visual legacy. *BMJ Supportive & Palliative Care*.

<http://spcare.bmj.com/content/early/2016/11/24/bmjspcare-2016-001179.full>

1. Kalaichandran, A. 'It's made a difference': How word clouds offer solace to family members as a loved one dies. *CBC News: Health*. April 23, 2017. <http://www.cbc.ca/news/health/word-cloud-humanizing-death-1.4079748?cmp=rss>
2. 'Word Clouds' comfort families and doctors of dying patients. *Reuters*. December 27, 2016. <http://www.foxnews.com/health/2016/12/27/word-clouds-comfort-families-and-doctors-dying-patients.html>

Vanstone, M. 900 CHML. "Scott Thompson Show" (Interviewer: Scott Thompson). December 17, 2014.

PRESENTATIONS AT MEETINGS

Invited Presentations (underlined name is the presenter)

1. Vanstone, M. Making sense of negative interpersonal interactions in the clinical learning environment: Grey areas of mistreatment and abuse. Sunnybrook Health Sciences Education Research Rounds. Toronto, ON. March 9 2021.
2. Vanstone, M. Experiences, beliefs, opinions of pregnant people and their partners considering cannabis use during pregnancy and lactation. McMaster Midwifery Research Symposium Keynote Presentation, November 3, 2020.
3. Vanstone, M. Making sense of negative interpersonal interactions in the clinical learning environment: What counts as mistreatment and what must we simply tolerate? Centre for Education Research & Innovation, University of Western Ontario Medical Education Seminar Series. December 3, 2019.
4. Vanstone, M. Mistreatment, abuse, unprofessionalism & erosive behaviours in the clinical workplace. University of California San Francisco Department of Anesthesia Medical Education rounds. San Francisco, California. November 26, 2019.
5. Vanstone, M. Qualitative research in medical education. Stanford University Department of Emergency Medicine. PEARLS rounds. Palo Alto, California. November 25, 2019.
6. Vanstone, M. Qualitative Research in Health Technology Assessment. Health Technology Assessment for Decision-Makers. Toronto Health Economics and Technology Assessment Collaborative. Toronto, Ontario. September 27, 2019.
7. Vanstone, M. Context Matters: Socialization and professionalism in medicine. Gender Equity in the Health Professions. PSI Foundation Visiting Scholars. Hamilton, Ontario. March 22, 2019.
8. Vanstone, M. Reporting and addressing unprofessional behavior. Touchstone Institute Annual Symposium. Toronto, Ontario. January 31, 2019.

9. Majid U, Vanstone M. Appraising Qualitative Research for Qualitative Evidence Syntheses. Health Services Research Rounds. University Health Network. Toronto, Ontario. 2018 Jun 22
10. Vanstone, M., Cernat, A., Majid, U., Trivedi, F., de Freitas, C. Perspectives of pregnant people, clinicians and others with lived experience of NIPT: A systematic review and qualitative meta-synthesis. Ontario Health Technology Advisory Committee. Health Quality Ontario. Toronto, Ontario. April 27, 2018.
11. Vanstone, M., Cernat, A., Majid, U., Trivedi, F., de Freitas, C. Perspectives of pregnant people, clinicians and others with lived experience of NIPT: A systematic review and qualitative meta-synthesis. Ontario Genetics Advisory Committee. Health Quality Ontario. Toronto, Ontario. April 20, 2018.
12. Vanstone, M. Encouraging compassionate end-of-life care in the ICU: The Three Wishes Project multi-site evaluation. St. Michael's Hospital Education Research Committee. Toronto, Ontario, January 22, 2018.
13. Vanstone, M. Ethical implications in the quickly expanding universe of prenatal testing: non-invasive prenatal testing and beyond. Southwestern Gynecological Assembly. Dallas, Texas. Dec 2, 2017.
14. Majid, U., Kandasamy, S., Arora, N., Vanstone, M. Women's preferences and experiences with HPV Screening for Cervical Cancer Prevention: A systematic review and qualitative meta-synthesis. Health Technology Expert Review Panel. Canadian Agency for Drugs and Technologies in Health. Ottawa, Ontario. September 29, 2017.
15. Vanstone, M. Ethics & Policy in Health Professional Education and Practice. Invited Keynote at the Health and Rehabilitation Sciences Research Day. University of Western Ontario, Jan 31, 2017.
16. Kandasamy, S., Khalid, A.F., Majid, U. Vanstone, M. Prostate Cancer Perspectives on the Use of Information in Treatment Decision-Making: A Systematic Review and Qualitative Meta-Synthesis. October 28, 2016. Ontario Health Technology Advisory Committee. Health Quality Ontario, Toronto, Ontario.
17. DeJean, D., Vanstone, M., Rewegan, A., Brundisini, F., Giacomini, M. "Patient perspectives on quality of life with uncontrolled Type 1 diabetes: Systematic review and qualitative meta-synthesis". March 27, 2015. Ontario Health Technology Advisory Committee. Health Quality Ontario, Toronto, Ontario.
18. Vanstone, M., Monteiro, S., Peters, A. "Understanding Clinical Intuition: Preliminary Findings and Methodological Reflections." January 13, 2015. CERI Rounds Seminar. Center for Education Research and Innovation, Schulich School of Medicine and Dentistry, Western University, London, Ontario.
19. Vanstone, M. "Patient Experiences of Barriers and Facilitators to Medication Adherence: Systematic Review and Qualitative Meta-Synthesis" Health Quality Ontario, July 18, 2014. Toronto, Ontario.
20. Vanstone, M. "Social and Ethical Implications of Reproductive Technology: The REDIH Experience and Beyond". December 1, 2013. CIHR Bi-Annual Meeting, Training Group in Reproductive, Early Development and In-Utero Health (REDIH). Ottawa, Ontario.

21. Abelson, J., Bombard, Y., Vanstone, M., Wagner, F. [Panel] "Public Engagement and Health System Decision-Making" November 21, 2013. Health Quality Transformation 2013. Toronto, Ontario.
22. Vanstone, M. Qualitative Research in Health Technology Assessment: Scope and Rationale. June 28, 2013. Health Quality Ontario Expert Advisory Panel on Community-Based Care for Adults with Type 2 Diabetes. Health Quality Ontario, Toronto, Ontario.
23. Vanstone, M. "Qualitative Research Approaches in Medical Education". March 26, 2013. Department of Internal Medicine, Hamilton Health Sciences. Medical Education Research Day. Juravinski Hospital and Cancer Care Centre, Hamilton, Ontario.
24. Vanstone, M., Giacomini, M., DeJean, D., Brundisini, F., Winsor, S., Smith, A. "Synthesizing qualitative research to inform health technology assessment for optimizing chronic disease management". January 25, 2013. Ontario Health Technology Advisory Committee (OHTAC) and Evidence Development & Standards (EDS). Health Quality Ontario, Toronto, Ontario
25. Vanstone, M., DeJean, D., Smith, A., Giacomini, M. "Diet modification challenges faced by vulnerable patients with diabetes and heart disease: A systematic review of qualitative research evidence". January 25, 2013. Ontario Health Technology Advisory Committee (OHTAC) and Evidence Development & Standards (EDS). Health Quality Ontario, Toronto, Ontario
26. DeJean, D., Giacomini, M., Vanstone, M., Brundisini, F. "Patient experiences of depression or anxiety with chronic disease: a systematic review of qualitative research evidence". January 25, 2013. Ontario Health Technology Advisory Committee (OHTAC) and Evidence Development & Standards (EDS). Health Quality Ontario, Toronto, Ontario
27. Brundisini, F., Giacomini, M., Vanstone, M., DeJean, D. "Rural chronic disease patients' experiences with accessing health care: A systematic review of qualitative research evidence". January 25, 2013. Ontario Health Technology Advisory Committee (OHTAC) and Evidence Development & Standards (EDS). Health Quality Ontario, Toronto, Ontario
28. Winsor, S., Smith, A., Giacomini, M., Vanstone, M., Brundisini, F., DeJean, D. "Experiences of patient-centeredness with specialized community based care (SCBC): A systematic review of qualitative research evidence". January 25, 2013. Ontario Health Technology Advisory Committee (OHTAC) and Evidence Development & Standards (EDS). Health Quality Ontario, Toronto, Ontario
29. Vanstone, M., Giacomini, M., DeJean, D., Brundisini, F., Winsor, S., Smith, A. "Systematic reviews of qualitative research evidence to optimize chronic disease management: patient experiences and challenges". December 21, 2012. Ontario College of Family Physicians, Health Quality Ontario Mega-Analysis: Optimizing Chronic Disease Management in the Community Setting. Toronto, Ontario.
30. Vanstone, M., Giacomini, M., DeJean, D., Brundisini, F., Winsor, S., Smith, A. "Introduction: Systematic reviews of empirical qualitative research on chronic condition patient experiences and selected challenges". November 8, 2012. Optimizing Chronic Disease Management (OCDM) Expert Panel, Ontario Health Technology Advisory Committee (OHTAC) and Evidence Development & Standards (EDS). Health Quality Ontario, Toronto, Ontario.
31. Vanstone, M., DeJean, D., Smith, A., Giacomini, M. "Diet modification challenges faced by vulnerable patients with diabetes and heart disease: A systematic review of qualitative research evidence". November 8, 2012. Optimizing Chronic Disease Management (OCDM) Expert Panel, Ontario Health Technology Advisory Committee (OHTAC) and Evidence Development & Standards (EDS). Health Quality Ontario, Toronto, Ontario.
32. DeJean, D., Giacomini, M., Vanstone, M., Brundisini, F. "Patient experiences of depression or anxiety with chronic disease: a systematic review of qualitative research evidence". November 8, 2012.

- Optimizing Chronic Disease Management (OCDM) Expert Panel, Ontario Health Technology Advisory Committee (OHTAC) and Evidence Development & Standards (EDS). Health Quality Ontario. Toronto, Ontario.
33. Brundisini, F., Giacomini, M., **Vanstone, M.**, DeJean, D. "Rural chronic disease patients' experiences with accessing health care: A systematic review of qualitative research evidence". November 8, 2012. Optimizing Chronic Disease Management (OCDM) Expert Panel, Ontario Health Technology Advisory Committee (OHTAC) and Evidence Development & Standards (EDS). Health Quality Ontario. Toronto, Ontario.
 34. Winsor, S., Smith, A., Giacomini, M., **Vanstone, M.**, Brundisini, F., DeJean, D. "Experiences of patient-centeredness with specialized community based care (SCBC): A systematic review of qualitative research evidence". November 8, 2012. Optimizing Chronic Disease Management (OCDM) Expert Panel, Ontario Health Technology Advisory Committee (OHTAC) and Evidence Development & Standards (EDS). Health Quality Ontario. Toronto, Ontario.
 35. **Vanstone, M.**, Kinsella, E.A., Niskier, J. "Facilitating Informed Choice in Prenatal Screening: What do pregnant women want to know?" January 18, 2011. Student Keynote Presentation. CIHR Bi-Annual Meeting, Training Group in Reproductive, Early Development and In-Utero Health (REDIH). Ottawa, Ontario.

Contributed

Peer Reviewed (underlined name is the presenter)

1. Hoad, N, Boyle A, Brandt-Vegas D, Cheung J, Clarke F, Cook D, Dennis B, Fiest K, Frances R, Hanmiah R, Heels-Ansdell D, Khalid Z, Reid J, Rudkowski J, Soth M, Swinton M, Takaoka A, Toledo F, Vanstone M, Woods A. Family presence during the pandemic: Clinician experiences from the 3 Wishes Project. Canadian Critical Care Forum (virtual). October 2020.
2. Swinton M, Boyle A, Brandt-Vegas D, Cheung J, Clarke F, Cook D, Dennis B, Fiest K, Frances R, Hanmiah R, Heels-Ansdell D, Hoad N, Huynh J, Khalid Z, Reid J, Rudkowski J, Soth M, Takaoka A, Toledo F, Vanstone M, Woods A. Technology-mediated communication at the end-of-life during pandemic times: What is gained, what is lost. Canadian Critical Care Forum (virtual). October 2020.
3. Burgess, R., Cernat, A., Little, L., **Vanstone, M.** Clinicians' perspectives on the implementation of non-invasive prenatal testing for fetal aneuploidy in Ontario, Canada (Oral). American Public Health Association Annual Meeting, Virtual, Oct 24-28, 2020.
4. Burgess R., Barber C., Mountjoy M., Whyte R., **Vanstone M**, Grierson L. Evaluating the validity evidence of admissions and medical school performance variables on student outcomes at McMaster University (Hamilton, Canada). Association of Medical Educators of Europe. Glasgow, Scotland. Sept 4-9, 2020. [Virtual]
5. Barber, C., Burgess, R., Mountjoy, M., Whyte, R., **Vanstone M.**, Grierson, L., Associations between academic or professional remediable medical student offences and admissions factors. Association of Medical Educators of Europe. Glasgow, Scotland. Sept 4-9, 2020. [Virtual]
6. **Vanstone, M.**, Cavanagh, A., Connelly, C., Bell, A., Mountjoy, M., Whyte, R., Grierson, L. Making sense of negative interpersonal interactions in the clinical learning environment: What counts as mistreatment and what must we simply tolerate? Association of Medical Educators of Europe. Glasgow, Scotland. Sept 4-9, 2020. [Virtual]

7. Hazar, H., **Vanstone, M.**, Labarge, M., Ravitsky, V. Implementation considerations for an ethical introduction of noninvasive prenatal testing: A qualitative study of healthcare professionals' views from Lebanon and Quebec. World Congress of Bioethics. June 18-21, 2020. Philadelphia, Pennsylvania, USA. [Virtual]
8. Christy, K., Kandasamy, S., Majid, U., & **Vanstone, M.** Understanding Black women's perspectives and experiences of cervical cancer screening: A systematic review and qualitative meta-synthesis. Canadian Sociological Association Conference. London, Ontario. June 2020. [Oral] Conference cancelled due to COVID-19 pandemic.
9. Grierson, L., & **Vanstone, M.** The distribution of available medical school opportunities in Canada by province of residence. Canadian Conference on Medical Education. Vancouver, BC. April 19-21, 2020. Conference cancelled due to COVID-19 pandemic.
10. **Vanstone, M.**, Allice, I., Baker, A., Farag, A., Guscott, J., Howard, M., Mountjoy, M., Siu, H., Tong, X.C., Grierson, L. How the Certificates of Added Competence shape family medicine practice in Canada. Canadian Conference on Medical Education. Vancouver, BC. April 19-21, 2020. Conference cancelled due to COVID-19 pandemic.
11. Cook, DJ; **Vanstone, M.**, Neville, T., Clarke, F., Swinton, M., Sadik, M., Takaoka, A., Smith, O, Baker, A., LeBlanc, A., Foster, D., Dhingra, V., Phung, P., Xu, X., Kao, Y, Heels-Ansdell, D., Tam, B., Toledo, F., Boyle, A., Sandhu, G., Hodder, J., Santos, M. Compassionate End-of-Life Care in the ICU: Mixed-methods multi-site evaluation of the Three Wishes Project. Canadian Critical Care Forum.
12. Sadik, Marina; **Vanstone, Meredith**; Neville, Thanh H.; Swinton, Marilyn; Takaoka, Alyson; Clarke, France; Hoad, Neala; Toledo, Feli; Tam, Ben; Leblanc, Alanna; Dhingra, Vinay; Smith, Orla; Baker, Andrew; Phung, Peter; Kao, Yuhan; Xu, Sherry; Cook, Deborah J. Building organizational compassion (for our patients and ourselves) through the Three Wishes Project. Canadian Critical Care Forum.
13. Piticaru J, Clarke F, Hoad N, Heels-Ansdell D, Takaoka A, Toledo F, Smith O, Baker A, Sandhu G, Leblanc A, Foster F, Dhingra V, Richardson J, Neville T, Phung P, Xu X, Kao Y, Granone M, Foster J, McMullen S, Reeve B, Dechert W, Swinton M, **Vanstone M**, Cook DJ for the Multicenter 3 Wishes Project Team. Spirituality and End-of-life Wishes in the ICU: A Multicenter Quantitative Analysis of the 3 Wishes Project J. Canadian Critical Care Forum 2019.
14. Takaoka A, Honarmand K, **Vanstone M**, Tam B, Clarke FJ, Swinton M, Smith O, Baker A, Hodder J, LeBlanc A, Dhingra V, Foster D, Hancock J, McMullen S, Meade M, Arora S, Hoad N, Neville T, Phung P, Cook DJ for the 3 Wishes Collaborators. Organ Donation at the End of Life: Experiences from the 3 Wishes Project. 49th Critical Care Congress. Orlando, FL. Feb 17, 2020. Published in Critical Care Medicine 2020; 48(1):387.
15. **Vanstone, M.**, Sadik, M., Swinton, M., Clarke, F., Toledo, F., Cook, D. Fostering organizational compassion in the ICU through the Three Wishes Project. Association of Medical Educators of Europe. Vienna, Austria. August 2019. [Oral]
16. Sebastian, A., Shickh, S., Mighton, C., Reble, E., Carroll, J., **Vanstone, M.**, Lerner-Ellis, J., Kodida, R., Bombard, Y. Primary care providers' experience managing incidental genomic sequencing results. North American Primary Care Research Conference, Toronto, Canada, November 19, 2019. [Oral]
17. McDonald, S., Yu, Z., Schmidt, L., Sword, W., **Vanstone, M.**, Biringer, A., Moaveni, A. A prospective cohort study of psychological, physical and social predictors of excess pregnancy weight gain. North American Primary Care Research Conference, Toronto, Canada, November 19, 2019. [Poster]

18. **Vanstone, M.**, Allice, I., Tong, X.C., Siu, H., Mountjoy, M., Howard, M., Guscott, J., Farag, A., Baker, A., & Grierson, L. How do the CFPC Certificates of Added Competence impact the provision of comprehensive care in Canada? A work-in-progress. North American Primary Care Research Conference, Toronto, Canada, November 17, 2019. [Poster]
19. Grierson L, Allice I, Baker A, Farag A, Guscott J, Howard M, Mountjoy M, Siu H, Tong XC, **Vanstone M.** How do CACs shape family medicine in Canada? A work-in-progress. Family Medicine Forum. Vancouver, British Columbia. October 30 2019. [Poster]
20. Patel, T., Christy, K., Grierson, L., Shadd, J., Farag, A., O'Toole, D., & **Vanstone, M.** Responding to Requests for Hastened Death. Family Medicine Forum. Vancouver, British Colombia. October 30 2019. [Poster]
21. Bell, A., Connelly, C.E., Walsh, A., **Vanstone, M.** Medical Student Mistreatment and Reporting: A Journey. Faculty of Health Science Research Plenary. Hamilton, Ontario. May 14, 2019 [Oral]
22. Bell, A., Connelly, C.E., Walsh, A. **Vanstone, M.** Medical Student Mistreatment and Reporting: A Journey. Norman Education Research Day. Hamilton, Ontario. June 5, 2019 [Oral]
23. Bell, A., Connelly, C.E., Walsh, A. **Vanstone, M.** Medical Student Mistreatment and Reporting: A Journey. Ontario Student Medical Education Research Conference. Toronto, Ontario. March 30, 2019 [Oral]
24. McDonald, S., Yu, M., Van Blyderveen, S., Schmidt, L., Sword, W., **Vanstone, M.**, Biringer, A., Moaveni, A., Beyene, J. Prediction of excess pregnancy weight gain using psychological, physical and social predictors: a validated model in a prospective cohort study. The Society for Pediatric and Perinatal Epidemiologic Research (SPER) Annual Meeting, Minneapolis, Minnesota, June 17-18, 2019. [Poster].
25. Christy, K., **Vanstone, M.**, Grierson, L, Shadd, J., Farag, A., Patel, T. Responding to requests for hastened death: Promoting quality care and education in the era of medical assistance in dying. Canadian Conference on Medical Education. Niagara Falls, Ontario. April 2019. [Oral].
26. Block, E., Bell, A., Stobbe, K., Walsh, A., **Vanstone, M.** The impact of clinical environments on trust-building between medical student clerks and their teachers. Canadian Conference on Medical Education. Niagara Falls, Ontario. April 2019. [Oral].
27. **Vanstone, M.**, Block, E., Cavanagh, A., Bell, A., Connelly, C., Mountjoy, M., Grierson, L. Mistreatment, abuse, unprofessionalism and erosive behaviours: How do medical learners make sense of negative interpersonal behaviour in the clinical workplace? Canadian Conference on Medical Education. Niagara Falls, Ontario. April 2019. [Oral].
28. Kandasamy, S., **Vanstone, M.**, Colvin, E., Chan, T., Sherbino, J., Monteiro, S. Making sense of our own mistakes: a critical narrative analysis of experienced generalist physician stories of error. Canadian Conference on Medical Education. Niagara Falls, Ontario. April 2019. [Oral].
29. Burgess, R., Mountjoy, M., **Vanstone, M.**, Grierson, L. Professionalism remediation: the relationship between severity of offence and quality of student insight as a function of the type of offence in McMaster's Undergraduate MD program. Canadian Conference on Medical Education. Niagara Falls, Ontario. April 2019. [Oral].
30. Burgess, R., Mountjoy, M., **Vanstone, M.**, Grierson, L. Probability of an offer based on pre- and post-interview rank at McMaster's University Undergraduate MD Program. Canadian Conference on Medical Education. Niagara Falls, Ontario. April 2019. [Oral].

31. Baskwill, A., Dore, K., Vanstone, M., Harnish, D. A description of the professional identity of massage therapists in Ontario. Canadian Conference on Medical Education. Niagara Falls, Ontario. [Poster]
32. Didyk, N. & **Vanstone, M.** Wilderness Education: Becoming an Expert Teacher at a Distributed Medical Education Campus. Canadian Conference on Medical Education. Niagara Falls, Ontario. April 2019. [Oral].
33. Swinton, M., **Vanstone, M.**, Smith, O., Baker, A., LeBlanc, A., Foster, D., Dhingra, V., Hoad, N., Takaoka, A., Clarke, F., Woods, A., Boyle, A., Toledo, F., Cook, D. Not all that counts can be counted: Managerial perspectives of the 3 Wishes Project. Society for Critical Care Medicine's Critical Care Congress. San Diego, California. February 2019.
34. Clarke, F., Neville, T., Swinton, M., Smith, O., Foster, D., Toledo, F., Hoad, N., Takaoka, A., Shears, M., Buck, K., Lee, C., Piacentino, R., Leblanc, A., Lockington, J., Goksoyr, S., Xu, X., Kao, Y., Granone, M., **Vanstone M.**, Heels-Ansdell, D., Baker, A., Dhingra, V., Phung, P., Cook, D. Patient and family engagement at the end of life: The multicenter 3 Wishes Project. Society for Critical Care Medicine's Critical Care Congress. San Diego, California. February 2019.
35. Tam, B., Clarke, F., Takaoka, A., Hoad, N., Toledo, F., Waugh, L., Soth, M., Rudkowski, J., Alhazzani, W., Duan, E., Perri, D., Ligori, T., Jaeschke, R., Hayes, C., Heels-Ansdell, D., Boyle, A., Woods, A., Swinton, M., **Vanstone, M.**, Cook, D. Facilitators enabling the transition of an end-of-life research project to a clinical program. Society for Critical Care Medicine's Critical Care Congress. San Diego, California. February 2019.
36. Takaoka A, Clarke F, Hoad N, Swinton M, Goksoyr S, Leblanc A, Foster D, Lockington J, Dhingra V, Neville T, Xu X, Kao Y, Phung P, Smith O, **Vanstone M**, Cook D. (2018). Post-Mortem Expressions of Compassion: A Secondary Qualitative Analysis of Family and Clinician Experiences of Sympathy Cards in the 3 Wishes Project. Canadian Critical Care Forum 2018. Toronto, Canada. November 6, 2018.
37. Christy, K & **Vanstone, M.** "Let's talk about stress, baby" – Understanding Black women's experiences of discrimination in the health care system during pregnancy: A review of the literature and proposal for future research. Racialized Maternal Health Conference. Toronto, Ontario. January 31 2019. [Poster].
38. Grierson, L., **Vanstone, M.**, Burgess, R., Walsh, A. Medical Education Research in the Context of Family Medicine. North American Primary Care Research Group. Chicago, IL, USA. November 10, 2018. [Forum]
39. Burrows, K., **Vanstone, M.** Barriers & Facilitators of Physician Assistant Integration: Lessons from Family Medicine Settings in Ontario, Canada. North American Primary Care Research Group. Chicago, IL, USA. November 11, 2018. [Oral]
40. **Vanstone, M.**, Block, E., Cavanagh, A., Bell, A., Mountjoy, M., Grierson, L., Connelly, C. "They belittle you, embarrass you, and humiliate you about something you did": Medical learner and educator perceptions of mistreatment and abuse in the clinical workplace. North American Primary Care Research Group. Chicago, IL, USA. November 10, 2018. [Oral]
41. Majid U, **Vanstone M.** The Problem(s) with Appraising Qualitative Research for Qualitative Evidence Syntheses. Qualitative Health Research Conference, Halifax, NS. 2018 Oct 25
42. Khalid AF, Lavis J, **Vanstone M**, El-Jardali F. No time to wait! I need it now! Supporting the use of research evidence in crisis situations: A critical interpretive synthesis. Emerging Voice Conference, Liverpool School of Tropical Medicine, Liverpool, UK, 6 October 2018. (Oral Presentation)

43. **Vanstone, M.**, Block, E., Cavanagh, A., Bell, A., Connelly, C. Mistreatment, abuse, unprofessionalism and unproductive behavior: A comparative qualitative analysis of how medical learners and educators define negative behavior in the clinical workplace. Association of Medical Educators of Europe. Basel, Switzerland. August 27, 2018. [Poster]
44. Mountjoy, M., Burgess, R., **Vanstone, M.**, Grierson, L. Rating the severity of medical student professionalism issues and the quality of insight demonstrated in students' response to professionalism remediation. Association of Medical Educators of Europe. Basel, Switzerland. August 27, 2018. [Poster]
45. Block, E., Walsh, A., Stobbe, K., **Vanstone, M.** "Just keep your head down": Influence of clinical environments on trust-building and emotional well-being of clerks. Geoffrey Norman Education Research Day, Hamilton, Ontario. June 6, 2018. [Oral]
46. De Freitas, C., Daniel, J., Mountjoy, M., **Vanstone, M.** Low Income Aspiring Physicians' Experiences of Barriers and Facilitators to Medical School Admission. Geoffrey Norman Education Research Day, Hamilton, Ontario. June 6, 2018. [Oral]
47. Mountjoy, M., Burgess, R., **Vanstone, M.**, Grierson, L. Predicting outcomes: Exploring the relationship between admissions information, medical school performance and national licensing exam outcomes. Geoffrey Norman Education Research Day, Hamilton, Ontario. June 6, 2018. [Oral]
48. Cavanagh, A., Brown, A., Burgess, R., Lee, M., **Vanstone, M.**, Grierson, L. MERIT Madness: Epistemology, Ideology & Bracketology. Geoffrey Norman Education Research Day, Hamilton, Ontario. June 6, 2018. [Oral]
49. Grierson, L., Burgess, R. Tavares, W., Mountjoy, M., **Vanstone, M.** The Rating Game: The congruence of constructs used by MMI raters and applicants. Geoffrey Norman Education Research Day, Hamilton, Ontario. June 6, 2018. [Oral]
50. Burgess, R., Mountjoy, M., Whyte, R., **Vanstone, M.**, Grierson, L. Rating the severity of medical student professionalism issues and the quality of insight demonstrated in students' responses to professionalism remediation. Geoffrey Norman Education Research Day, Hamilton, Ontario. June 6, 2018. [Oral]
51. **Vanstone, M.**, Abelson, J., Bond, K., Bidonde, J., Schwartz, L., Tripp, L., Canfield, C. Ethical challenges related to engaging patients and the public in HTA. Health Technology Assessment International (HTAi). Vancouver, Canada. June 5, 2018. [Oral]
52. Majid, U., Kandasamy, S., Arora, N., **Vanstone, M.** Women's preferences and perspectives on cervical cancer screening. Health Technology Assessment International (HTAi). Vancouver, Canada. June 4, 2018. [Oral]
53. Majid, U., **Vanstone, M.** Appraising qualitative research for qualitative evidence syntheses. Health Technology Assessment International (HTAi). Vancouver, Canada. June 4, 2018. [Oral]
54. Bidonde, J., Abelson, J., Clifford, T., O'Reilly, D., Schwartz, L., Tarride, J-E., **Vanstone, M.** What does it mean to assess the impact of PPE in HTA? Health Technology Assessment International (HTAi). Vancouver, Canada. June 3, 2018. [Poster]
55. Kibel, M., **Vanstone, M.** Reconciling ethical and economic notions of 'value' for HTA. Health Technology Assessment International (HTAi). Vancouver, Canada. June 3, 2018. [Oral]

56. Cavanagh, A., **Vanstone, M.**, Ritz, S. Theory in (Medical) Practice: Insights from critical pedagogy for the problem-based medical curriculum. Canadian Conference on Medical Education. Halifax, NS. April 28, 2018. [Poster].
57. Majid U, Vanstone M. Appraising the Quality of Qualitative Research for Inclusion in Evidence Syntheses: A Compendium of Quality Appraisal Tools. Canadian Agency for Drugs and Technologies (CADTH) Symposium, Halifax, NS. 2018 Apr 14 [oral]
58. Kibel, M., **Vanstone, M.** Reconciling Economic and Ethical Evaluation in Health Technology Assessment Using the Capabilities Approach. CADTH Symposium. Halifax, Canada. April 2018. [Poster].
59. Grierson L., **Vanstone M.** How do medical students respond to difficult requests from preceptors?. 2017 NAPCRG Senior Investigator Learning Community, North American Primary Care Research Group, Montreal, PQ. Nov 19th, 2017. [Workshop]
60. **Vanstone, M.** The diffusion of non-invasive prenatal testing into primary care: Supporting family doctors in the provision of quickly-evolving, morally complex health technologies. 2017 NAPCRG Junior Investigator Learning Community. North American Primary Care Research Group, Montreal PQ. November 18, 2017. [Workshop]
61. Chan, T., **Vanstone, M.**, Pardhan, A., Vallera, T., Schiff, K., Sherbino, J. Making us strange: Including non-MD members in a clinical competency committee. International Conference on Residency Education. Quebec City, Quebec. October 16, 2017. [Oral]
62. **Vanstone, M.**, Monteiro, S., Norman, G., Peters, A., Sherbino, J., Sibbald, M., Dore, K., Colvin, E. A typology of experienced physician descriptions of diagnostic intuition in generalist practice. Diagnostic Error in Medicine Conference. Boston, MA, October 8-10, 2017. [Poster]
63. Shears, M., Tam B, Takaoka A, Clarke F, Toledo F, Hoad N, Boyle A, Woods A, Soth M, Rudkowski J, Alhazzani W, Perri D, Duan E, Jaeschke R, Ligor T, Hayes C, Swinton M, **Vanstone M**, Sheppard R, Cook D. Evolution and expansion of Wishes in the 3 Wishes Program. Canadian Critical Care Forum. Toronto, ON. October 2, 2017. [Oral]
64. **Vanstone, M.**, Grierson, L., Bracken, K., Baird, J. Observers, Disturbers and Team Members: medical student experiences of social power in the clinical learning environment. Association of Medical Educators of Europe. Helsinki, Finland. August 27, 2017. [Oral]
65. Majid, U., Kandasamy, S., Khalid, AF., **Vanstone, M.** Systematic Review and Qualitative Meta-Synthesis. Faculty of Health Sciences Research Plenary 2017, McMaster University, Hamilton, ON. May 31, 2017. [Poster]
66. Majid, U., **Vanstone, M.** Appraising the Quality of Qualitative Research for Inclusion in Evidence Syntheses: A Comparison of Availability Quality Appraisal Tools. Annual Cochrane Canada Symposium, Hamilton, ON. May 11, 2017. [Poster]
67. **Vanstone, M.**, Monteiro, S., Sibbald, M., Sherbino, J., Peters, A., Norman, G., Dore, K. Experienced Physicians' Understanding of Intuitive Forms of Clinical Reasoning. Canadian Conference on Medical Education. Winnipeg, MB. May 1, 2017 [Oral]
68. Baird, J., Grierson, L., Bracken, K., **Vanstone, M.** How Clerks Experience Power in Clinical Learning Environments. Canadian Conference on Medical Education. Winnipeg, MB. May 1, 2017. [Oral]
69. Clarke F, Toledo F, Zytaruk N, Boyle A, Woods A, Swinton M, Pellizzari J, Shears M, Hoad N, Duchesne S, Arora S, **Vanstone M**, Heels-Ansdell M, Payne G, Cook DJ. Continuing Connections

- with Bereaved Family Members: Post-Mortem Experiences From the 3 Wishes Project. International Palliative Care Congress, October 2016, Montreal, Quebec
70. Toledo F, Swinton M, Clarke F, Saunders L, Woods A, Boyle A, Shears M, Zytaruk N, Rose T, Hand-Breckenridge T, **Vanstone M**, Giacomini M, Sheppard R, D Cook. The Word Cloud: A Visual Legacy of a Loved One's Life. International Palliative Care Congress, October 2016, Montreal, Quebec
 71. **Vanstone, M.**, Giacomini, M., Schwartz, L., Nisker, J. Empirical evidence for ethical policy-making about morally complex technologies: Women's values and personal experiences with non-invasive prenatal testing. American Society of Bioethics and Humanities. Washington, DC. October 8, 2016. [Oral]
 72. **Vanstone, M.**, Giacomini, M., Schwartz, L., Little, L., "Just because we can doesn't mean we should": A comparison of ethical issues related to NIPT identified by clinicians and pregnant women. Annual Meeting of the Canadian Fertility and Andrology Society. Toronto, ON, Sept 24, 2016 [Oral]
 73. Little, L., **Vanstone, M.**, Evans, M., Nisker, J., de Vrijer, B. (2016) Women's misconceptions about non-invasive prenatal testing: A qualitative secondary analysis. Presented at the Annual meeting of the Society of Obstetricians and Gynecologists of Canada. June 14, 2016. Vancouver, BC. [Oral]
 74. **Vanstone, M.**, Giacomini, M., Schwartz, L., Nisker, J. (2016). Making ethical policy about morally complex health technologies: Women's values and personal experiences with non-invasive prenatal testing (NIPT). Canadian Bioethics Society. May 27, 2016. Toronto, ON. [Oral]
 75. **Vanstone, M.**, Giacomini, M., Schwartz, L. (2016). Using Qualitative Research Methods to Produce Ethics and Values Evidence for Health Policy Decision-Making: A case study of women's values and personal experiences with Non-Invasive Prenatal Testing. Canadian Association of Health Services and Policy Research. May 11, 2016. Toronto, ON. [Oral]
 76. **Vanstone, M.** and Giacomini, M. (2016). Using qualitative research methods to solicit patient experiences and values for health technology policy-making. Canadian Agency for Drugs and Technology in Health (CADTH) Annual Symposium. April 11, 2016, Ottawa, ON. [Oral]
 77. Shears M, Swinton M, Clarke F, Toledo F, Woods A, Boyle A, Hoad N, French T, Rose T, Hand-Breckenridge T, Giacomini M, **Vanstone M**, Sheppard S, Cook D. Expanding the 3 Wishes Project: Potential Challenges and Solutions. Niagara Health Quality Symposium. Niagara Falls, Ontario. April 7, 2016. [Poster]
 78. Shears, M., Swinton, M., Clark, F., Toledo, F., Woods, A., Boyle, A., Hoad, N., French, T., Rose, T., Hand-Breckenridge, T., Sheppard, R., Giacomini, M., **Vanstone, M.**, Cook, D.J. (2016). Expanding the 3 Wishes Project: Potential Challenges and Implementation Suggestions. Niagara Health Quality Symposium, April 6, 2016. Niagara Falls, ON. [Poster].
 79. Peters, A. & **Vanstone, M**, Monteiro, S., Norman, G., Sherbino, J., Sibbald, M. Examining the Influence of Context and Professional Culture on Clinical Reasoning through Rhetorical-Narrative Analysis. CERI Symposium Oct 2015 London, ON [Oral]
 80. Kandasamy, S., **Vanstone, M.**, Oremus, M., Wahi, G., Anglin, R., Wilson, J. Anand, S. You're not sick, you're pregnant: prenatal and postnatal wellbeing in a First Nations context. CIHR Meeting of Strategic Training Program in Reproduction, Early Development, and the Impact on Health. McGill University, Montreal, Quebec. June 4, 2015. [Oral]
 81. Peters, A. & **Vanstone, M.** (2015). What can 'evidence' not tell us? A rhetorical-narrative analysis toward understanding the exclusion of 'intuition' in physicians' stories about clinical reasoning. Canadian Sociological Association, June 3, 2015. Ottawa, Ontario. [Oral]

82. Kandasamy, S., **Vanstone, M.**, Oremus, M., Wahi, G., Anglin, R., Wilson, J. Anand, S. Understanding Six Nations Grandmothers' cultural perceptions and beliefs around prenatal and postnatal health behaviours. (Faculty of Health Sciences Research Plenary), McMaster University, Hamilton, Ontario. May 5, 2015. [Poster, winner of "Excellence in Poster Presentation" Award for graduate students].
83. Kandasamy, S., **Vanstone, M.**, Oremus, M., Wahi, G., Anglin, R., Wilson, J. Anand, S. Grounded Theory Study protocol for understanding Six Nations Grandmothers' cultural perceptions and beliefs around prenatal and postnatal health behaviours. Health Research Methodology Student Rounds, McMaster University, Hamilton, Ontario. April 15, 2015. [Oral]
84. Kandasamy, S., Wahi, G., **Vanstone, M.**, Oremus, M., Anglin, R., Wilson, J. Anand, S. Understanding Six Nations grandmothers beliefs and cultural perceptions about pre and post-natal health behaviours. Clinical Epidemiology & Biostatistics Research Day. March 26, 2015. McMaster University, Hamilton, ON [Poster]
85. Kandasamy, S., **Vanstone, M.**, Oremus, M., Wahi, G., Anglin, R., Wilson, J. Anand, S. Study protocol and preliminary results for a qualitative study assessing Six Nations Grandmothers' beliefs around prenatal and postnatal health behaviours. Academic Oral Presentation. CIHR Meeting of Strategic Training Program in Reproduction, Early Development, and the Impact on Health. University of Ottawa, Ottawa, ON. December 3, 2014. [Oral]
86. Burrows, K., **Vanstone, M.** Physician Assistants in Canada: An emerging profession. Canadian Health Workforce Conference. October 22, 2014. Ottawa, ON. [Poster]
87. **Vanstone, M.**, DeJean, D., Giacomini, M. (2014). A reflection on systematic search strategies for qualitative health research to inform HTA: To find the needle, you must get rid of the hay. Health Technology Assessment International, June 18, 2014. Washington, DC, USA [Oral]
88. Brundisini, F., **Vanstone, M.**, Hulan, D., DeJean, D., Giacomini, M. (2014). Facilitating a patient-centered approach to medication adherence among Type 2 Diabetes patients: differences between patient and provider understandings of information requirements. Health Technology Assessment International, June 18, 2014. Washington, DC, USA [Oral]
89. **Vanstone, M.**, Giacomini, M., Nisker, J. (2014). Ethical implications of a new form of prenatal testing: Non-Invasive Prenatal Testing via cell free fetal DNA in maternal blood. Canadian Bioethics Society. May 31, 2014. Vancouver, BC. [Oral]
90. Bond, K., Johnston, J., Langlois, S., Pullman, D., Ravitsky, V., **Vanstone, M.** (2014) Assessing NIPT for Fetal Aneuploidies: Integrating Ethics in Health Technology Assessment. Pre-Conference Workshop. Canadian Bioethics Society, May 28, 2014. Vancouver, BC. [Workshop]
91. **Vanstone, M.**, Boesveld, S., Burrows, K. (2014). Introducing physician assistants to the Ontario healthcare workforce: Health reform analysis. Canadian Association of Health Services and Policy Research. May 15, 2014. Toronto, ON. [Poster]
92. Brundisini, F., **Vanstone, M.** Hulan, D., DeJean, D., Giacomini, M. (2014). Facilitating a patient-centered approach to medication adherence among Type 2 diabetes patients: differences between patient and provider understandings of information requirements. New Frontiers in Health Policy Research. April 12, 2014. McMaster University, Hamilton, ON [Poster]
93. **Vanstone, M.** Brundisini, F., Hulan, D., DeJean, D., Giacomini, M. (2014). Patient and provider perspectives on diabetes medication adherence: A systematic review and qualitative meta-synthesis. Canadian Association for Drugs and Technology in Health. April 9, 2014. Ottawa, ON. [Oral]

94. DeJean, D., Vanstone, M., Giacomini, M. (2014). Using qualitative research in HTA: Strategies for systematic searching and sorting to identify relevant qualitative literature. Canadian Association for Drugs and Technology in Health. April 9, 2014. Ottawa, ON. [Oral]
95. Vanstone, M., Boesveld, S., Burrows, K. (2014). Introducing physician assistants to the Ontario healthcare workforce: Health reform analysis. Clinical Epidemiology & Biostatistics Research Day. March 27, 2014. McMaster University, Hamilton, ON [Oral]
96. Brundisini, F., Vanstone, M. Hulan, D., DeJean, D., Giacomini, M. (2014). Facilitating a patient-centered approach to medication adherence among Type 2 diabetes patients: differences between patient and provider understandings of information requirements. Clinical Epidemiology & Biostatistics Research Day. March 27, 2014. McMaster University, Hamilton, ON [Poster]
97. Cristancho S., Apramian T., Vanstone M., Lingard L., Novick R., Ott M. (2013). Understanding surgical uncertainty: What is going on when experienced surgeons are not sure what to do? Research in Medical Education Conference (RIME), November 2nd – 6th, 2013
98. Cristancho S., Apramian T., Vanstone M., Lingard L., Novick R., Ott M. (2013). Thinking Like an Expert: Implications of a Theoretical Model of Intraoperative Decision-Making for Surgical Education. Association for Medical Education in Europe (AMEE), Prague, Czech Republic, August 26-29.
99. Vanstone, M., Giacomini, M., Smith, A., Brundisini, F., DeJean, D., Winsor, S. Challenges faced by heart disease and diabetes patients as they modify their diets: The influence of social vulnerability. Canadian Association of Health Services and Policy Research. May 30, 2013. Vancouver, British Columbia.
100. Vanstone, M., Giacomini, M., DeJean, D., Brundisini, F., Winsor, S. A new conceptual framework and methodology for systematically synthesizing qualitative research to address social values in health technology policy. Canadian Association of Health Services and Policy Research. May 30, 2013. Vancouver, British Columbia. [Poster]
101. Vanstone, M., Giacomini, M., Smith, A., Brundisini, F., DeJean, D., Winsor, S. Diet modification challenges experienced by vulnerable and non-vulnerable diabetes patients: A systematic review and qualitative meta-synthesis. Clinical Epidemiology & Biostatistics Research Day. March 22, 2013. McMaster University, Hamilton, ON.
102. Vanstone, M., Goldszmidt, M., Watling, C., Weijer, C., Lingard, L. Resigned Professionalism? Non-Acute inpatients and resident education. American Academy of Medical Colleges: Research in Medical Education. November 14 2012, San Francisco, CA.
103. Cristancho S., Vanstone M., Apramian T., Lingard L., Novick R., Ott M. (2013). Making the Tacit Explicit: Developing a Language to Describe How Experienced Surgeons Approach Intra-Operative Uncertainty. Canadian Conference on Medical Education (CCME), Quebec City, PQ, April 20-23.
104. Watling, C., Driessen, E., Van der Vleuten, C., Vanstone, M., Lingard, L. Professional culture influences how learners value feedback: Variations on themes of constructiveness and credibility. American Academy of Medical Colleges: Research in Medical Education. November 14 2012, San Francisco, CA.
105. Cristancho S., Vanstone M., Apramian T., Lingard L., Novick R., Ott M. (2012). Making the tacit explicit: Developing a language to describe how experienced surgeons approach intra-operative uncertainty. 51st Annual Conference on Research in Medical Education (RIME). San Francisco, USA, November 2-7.

106. Cristancho, S., **Vanstone M.**, Apramian T., Lingard L., Novick R., Ott M. (2012) Towards a theoretical language of uncertainty: implications for surgical education and training. 2012 International Conference on Surgical Education and Training (ICOSSET), Royal College of Physicians & Surgeons of Canada, Ottawa, ON, October 17-18.
107. Cristancho S., **Vanstone M.**, Lingard L., LeBel M.E., Ott M. (2012). Making the tacit explicit: Developing a language to describe how experienced surgeons approach intra-operative uncertainty. 2012 Centre for Education Research & Innovation Research Symposium, Western University, London, ON, October 9.
108. Cristancho S., LeBel M.E., Ott M., Lingard L., **Vanstone M.** (2012). Towards a theoretical language of uncertainty: implications for surgical education and training. Association for Medical Education in Europe (AMEE) Annual Meeting, Lyon, France, August 24-27.
109. Hibbert, K., **Vanstone, M.**, Pitman, A, Kinsella, E. A., McKenzie, P., Wilson, T., Lingard, L. The quest for effective interdisciplinary graduate supervision: Considerations for current students and future supervisors. *Canadian Committee of Graduate Students in Education (CCGSE), Canadian Society for Studies in Education (CSSE)*. May 15, 2012, Waterloo, ON.
110. Hibbert, K., Lingard, L., Kinsella, E. A., McKenzie, P., Pitman, A., **Vanstone, M.** & Wilson, T. Interdisciplinary supervision and professional practice, education and learning. *Professional Practice, Education and Learning (ProPEL) International Conference*. May 4, 2012. Stirling, Scotland.
111. Hibbert, K., Lingard, L., **Vanstone, M.**, Kinsella, E. A., McKenzie, P., Pitman, A. & Wilson, T. The quest for effective interdisciplinary graduate supervision: A critical narrative analysis. *Education Research Day*. April 12, 2012. Western University, London, ON. [Poster]
112. Cristancho S., Lingard L., LeBel M.E., Ott M., **Vanstone M.** (2012). Naturalistic exploration of intraoperative challenges faced by surgical experts. Canadian Conference in Medical Education (CCME). Banff, Alberta, Canada, April 14-18.
113. Cristancho S., **Vanstone M.**, Lingard L., LeBel M.E., Ott M. (2012). When surgeons face intraoperative challenges: a naturalistic conceptualization. Association for Surgical Education (ASE) Annual Meeting, San Diego, California, USA, March 24-26.
114. **Vanstone, M.**, Kinsella, E. A., Nisker, J. Facilitating informed choice in prenatal screening: a hybrid model of decision-making. *Center for Education Research and Innovation Annual Symposium*. October 4, 2011. London, ON.
115. **Vanstone, M.**, Hibbert, K., Kinsella, E. A., McKenzie, P., Pitman, A., Wilson, T., Lingard, L. Interdisciplinary doctoral supervision teams: Working together within, between and outside of disciplinary boundaries. *Center for Education Research and Innovation Annual Symposium*. October 4, 2011. London, ON.
116. Watling, C.; Driessen, E.; Vandervleuten, C.; **Vanstone, M.**; Lingard, L. Understanding feedback responses: The potential and limitations of Regulatory Focus Theory. *Center for Education Research and Innovation Annual Symposium*. October 4, 2011. London, ON.
117. Hibbert, K., Lingard, L., Pitman, A., Kinsella, E.A., Wilson, T., McKenzie, P., **Vanstone, M.**, Masinire, A. Identifying strengths and challenges in interdisciplinary graduate research. *Canadian Association for Information Science Annual Congress*. June 15 2011. Fredericton, NB.

118. **Vanstone, M.**, Kinsella, E. A., Nisker, J. Facilitating informed choice in prenatal screening: What pregnant women want to know when deciding to participate. *Annual Clinical Meeting, Society of Obstetricians and Gynecologists of Canada*. June 1 2011. Vancouver, BC. [Poster]
119. **Vanstone, M.**, Kinsella, E. A., Nisker, J. Women's Self-Identified Information Needs When Considering Participation in Integrated Prenatal Screening. *Paul Harding Obstetrics and Gynecology Research Day*. May 13 2011. London, ON.
120. **Vanstone, M.**, Chow, W., Lester, L., Ainsworth, P., Nisker, J., Brackstone, M. Characteristics and Understandings of BRCA-positive Women with Preventable Breast Cancer. *Canadian Bioethics Society*. June 11 2010, Kelowna, BC.
121. **Vanstone, M.**, Kinsella, E. A., Nisker, J. Prenatal screening patient education pamphlets: Metaphors, figurative language, and ethical implications. *Canadian Bioethics Society*. June 11 2010, Kelowna, BC.
122. Bourgeault, I.L., Declercq, E., Sandall, J., Wrede, S., **Vanstone, M.**, van Teijlingen, E., DeVries, R., Benoit, C. Comparative Perspectives on Maternal Request Caesarean Sections in Canada, the US, the UK and Finland. *ESF EMRC/SCSS Exploratory Workshop: Promoting Normality in Childbirth Across Europe*. March 12 2010, Dublin, IRE. [Poster]
123. **Vanstone, M.**, Kinsella, E. A., Nisker, J. Non-Directive Counselling and Medical Metaphors: Critical Discourse Analysis of Prenatal Screening Patient Education Pamphlets. *American Society of Bioethics and Humanities Conference*. October 16 2009. Washington, DC. [Poster]
124. **Vanstone, M.**, Kinsella, E. A., Nisker, J. Reading Between the Lines: Metaphors in Patient Education Pamphlets. *Annual Clinical Meeting, Society of Obstetricians and Gynecologists of Canada*. June 12 2009. Halifax, NS.
125. **Vanstone, M.** & Nisker, J. Comparison of Genetic Testing in Canada: Legal, Ethical, Policy issues. *Annual Clinical Meeting, Society of Obstetricians and Gynecologists of Canada*. June 12 2009. Halifax, NS.
126. **Vanstone, M.**, Kinsella, E.A., Nisker, J. Metaphor as an Approach to Critical Reflection. *Engaging Reflection in Health Professional Education and Practice Conference*. May 15 2009. London, ON.
127. **Vanstone, M.** & Nisker, J. Genetic Testing in Canada: From Pre-pregnancy to Adult. *Paul Harding Obstetrics and Gynecology Research Day*. May 8 2009. London, ON.
128. **Vanstone, M.**, Kinsella, E.A., Nisker, J. Prenatal Screening Patient Education Pamphlets: Critical Discourse and Metaphor Analysis. *Western Graduate Research Forum*. February 13 2009. London, ON. [Poster]

Not Peer Reviewed

1. **Vanstone, M.**, Monteiro, S., Sibbald, M., Sherbino, J., Peters, A., Norman, G., Dore, K. Experienced Physicians' Understanding of Intuitive Forms of Clinical Reasoning. Geoffrey Norman Education Research Day. June 5, 2017. McMaster University, Hamilton, Ontario.
2. **Vanstone, M.** and Norman, G. "Understanding Clinical Intuition: Research Design and Proposal." September 17, 2014. Department of Family Medicine, McMaster University. Medical Education Research Interest Group. McMaster Innovation Park, Hamilton, Ontario.
3. **Vanstone, M.** "Sex and Gender Analysis in Health Economics and Policy Analysis". November 20, 2013. CHEPA Seminar Series. McMaster University, Hamilton, Ontario.

4. **Vanstone, M.**, Giacomini, M., DeJean, D., Brundisini, F., Winsor, S., Smith, A. "Systematically Synthesizing Qualitative Research to Address Social Values in Health Technology Assessment". April 24, 2013. CHEPA Seminar Series. McMaster University, Hamilton, Ontario.
5. **Vanstone, M.** "Perceptions, experiences, and power: Qualitative research approaches for medical education research". February 6, 2013. Department of Family Medicine, McMaster University. Medical Education Research Interest Group. McMaster Innovation Park, Hamilton, Ontario.
6. **Dufour, S. Ng, S., Phelan, S., Vanstone, M.** Doctoral Experiences of Conducting Grounded Theory Research. *Health Professional Education Seminar, Western University*. October 26, 2011. London, ON.

Administrative Responsibilities

Department

- | | |
|-----------|--|
| 2013-2016 | Member, Appointment, Tenure & Promotion Committee. Department of Clinical Epidemiology & Biostatistics |
| 2013-2016 | Member, Steering Committee, Department of Clinical Epidemiology & Biostatistics. |

Faculty

- | | |
|------------------|---|
| 2020-present | Adjunct scientist, McMaster Program for Education Research, Innovation, and Theory (MERIT), Faculty of Health Sciences, McMaster University |
| 2018 – present | Chair, Admissions Committee, MSc Health Sciences Education program |
| 2017 – present | Member, Admissions Committee, Health Policy PhD Program |
| 2017 – 2020 | Scientist, McMaster Program for Education Research, Innovation, and Theory (MERIT), Faculty of Health Sciences, McMaster University |
| 2017 – present | Member, Admissions Committee, Undergraduate MD Program |
| 2017, 2018, 2020 | Member, Faculty Recruitment Selection Committee, McMaster program for Education Research, Innovation and Theory. |
| 2017 | Member, Assistant Dean Selection Committee, Program for Education Research and Development |
| 2016 – 18 | Member, Department of Emergency Medicine Residency Program Competency Committee |
| 2016 – 2020 | Education Scientist, Undergraduate MD program, McMaster University |
| 2016 – 17 | Member, Curriculum Committee, MSc Health Sciences Education Program |
| 2016 – 17 | Chair, Admissions Committee, MSc Health Sciences Education program |
| 2016 – 17 | Senior Scientist, Program for Education Research and Development (PERD) |
| 2014 – 16 | Member, MIETL Research Working Group on Interdisciplinary Teaching and Learning |

- 2014-15, 2018 Member, Continuing Health Sciences Education Research and Innovation Committee
- 2014 – 2015 Member, FHS review committee for CIHR and OGS scholarships
- 2013 – present Member, Comprehensive Exam committee, Health Policy PhD program
- 2013 – present Member, Centre for Health Economics and Policy Analysis (CHEPA), McMaster University

CURRICULUM VITAE

STACEY A. RITZ

ASSOCIATE PROFESSOR

Department of Pathology
& Molecular Medicine
2015 – present

ASSISTANT DEAN

Bachelor of Health Sciences
(Honours) Program
2015 - present

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RESEARCH INTERESTS

- integrating sex and gender into laboratory-based research
- critical discourse analysis and critical literacy in health professional education

EDUCATION

BSc (Hons)	<u>McMaster University</u> Biology (minor in philosophy)	1997
PhD	<u>McMaster University</u> Molecular Immunology, Virology, & Inflammation Programme <i>Thesis Title: "Cytokine Regulation of Immune Responses in the Respiratory Mucosa"</i>	2003
MEd	<u>University of Western Ontario</u> Curriculum Studies <i>Thesis Title: "A Critical Discourse Analysis of Medical Students' Reflective Writing: The Hidden Curriculum, Social Accountability, and Critical Reflexivity"</i>	2015

APPOINTMENTS

Associate Professor (2015 – present)	Department of Pathology & Molecular Medicine MCMMASTER UNIVERSITY Hamilton ON
Assistant Dean (2015 – Present)	Bachelor of Health Sciences (Honours) Program MCMMASTER UNIVERSITY Hamilton ON
Associate Professor (pt) (2015 – present)	Medical Sciences Division
Associate Professor (2010 – 15)	NORTHERN ONTARIO SCHOOL OF MEDICINE
Assistant Professor (2005 – 10)	Sudbury ON
Core Faculty (2007 – 2015)	Biomolecular Sciences PhD Programme LAURENTIAN UNIVERSITY Sudbury ON
Associate Member (2007 – present)	Centre d'étude des interactions biologiques entre la santé, la société, et l'environnement (CINBIOSE) UNIVERSITÉ DU QUÉBEC À MONTRÉAL Montréal QC
Post-doctoral Fellow (2004-05)	Clinical Immunology & Allergy David Geffen School of Medicine UNIVERSITY OF CALIFORNIA – LOS ANGELES Los Angeles CA

PUBLICATIONS

1. Pape M, Karkazis K, Latham L, Ritz SA. (2020) Lab Meeting: Resisting and remaking sex in the petri dish, the clinic, and on the track. *Catalyst: Feminism, Theory, Technoscience* 6(2):1-17.
2. Collective on Praxis in Health Sciences Education (SA Ritz, member) (2020). Who is 'we'? Attending to similarity and difference as discourse praxis in the university classroom. *Journal of Praxis in Higher Education* 2(1):11-27.
3. Cavanagh A, Vanstone M, Ritz SA. (2019) Problems of problem-based learning: Towards transformative critical pedagogy in medical education. *Perspectives on Medical Education* 8(1):38-42.
4. Ritz SA. (2017) Complexities of addressing sex in *in vitro* cell culture research. *Signs: Journal of Women in Culture and Society* 42(2):307-327.

5. **Ritz SA**. (2015) Male-female comparisons are not adequate for addressing sex in cell culture research in Joel D, Kaiser A, Richardson SS, Ritz SA, Roy D, Subramaniam B (2015). Lab Meeting: A discussion on experiments and experimentation. *Catalyst: Feminism, Theory, Technoscience* 1(1):1-12.
6. **Ritz SA**, Beatty K, Ellaway RH. (2014) Accounting for social accountability: Developing critiques of social accountability within medical education. *Education for Health* 27(2):152-157.
7. Dorman SC, **Ritz SA**. (2014) Smoke exposure has transient pulmonary and systemic effects in wildland firefighters. *Journal of Respiratory Medicine* Article ID 943219.
8. Dorman SC, Sutcliffe KM, Abourbih J, **Ritz SA**. (2014) Inhalation of nebulized diesel particulate matter: A safety trial in healthy humans. *Journal of Respiratory Medicine* Article ID 797050.
9. **Ritz SA**, Antle D, Côté J, Deroy K, Fraleigh N, Messing K, Parent L, St-Pierre J, Vaillancourt C, Mergler D. (2014) First steps for integrating sex and gender considerations into basic experimental biomedical research. *The FASEB Journal* 28(1):4-13.
10. **Ritz SA**, Bussoli MB, Dorman SC. (2010) Alcohol fixation of induced sputum for application in rural communities. *Canadian Respiratory Journal* 17(3):115-121.
11. **Ritz SA**. (2010) Air pollution as a potential contributor to the 'epidemic' of autoimmune disease. *Medical Hypotheses* 74(1):110-7.
12. **Ritz SA**, Wan J, Diaz-Sanchez D. (2007) Sulforaphane-stimulated phase II enzyme induction inhibits cytokine production by airway epithelial cells stimulated with diesel extract. *American Journal of Physiology: Lung Cellular & Molecular Physiology* 292(1):L33-9.
13. **Ritz SA**, Cundall MJ, Gajewska BU, Swirski FK, Wiley RE, Alvarez D, Coyle AJ, Stämpfli MR, Jordana M. (2004) The lung cytokine microenvironment influences molecular events in the lymph nodes during Th1 and Th2 respiratory mucosal sensitization to antigen *in vivo*. *Clinical & Experimental Immunology* 138(2):213-20.
14. **Ritz SA**, Cundall MJ, Gajewska BU, Alvarez D, Gutierrez-Ramos JC, Coyle AJ, McKenzie AN, Stämpfli MR, Jordana M. (2002) Granulocyte/macrophage colony-stimulating factor-driven respiratory mucosal sensitization induces Th2 differentiation and function independently of interleukin-4. *American Journal of Respiratory Cell & Molecular Biology* 27(4):428-35.
15. **Ritz SA**, Stämpfli MR, Davies DE, Holgate ST, Jordana M. (2002) On the generation of allergic airways diseases: From GM-CSF to Kyoto. *Trends in Immunology* 23(8):396-402.
16. Swirski FK, Gajewska BU, Alvarez D, **Ritz SA**, Cundall MJ, Cates EC, Coyle AJ, Gutierrez-Ramos JC, Inman MD, Jordana M, Stämpfli MR. (2002) Inhalation of a harmless antigen (ovalbumin) elicits immune activation but divergent immunoglobulin and cytokine activities in mice. *Clinical & Experimental Allergy* 32(3):411-21.
17. Gajewska BU, Swirski FK, Alvarez D, **Ritz SA**, Goncharova S, Cundall M, Snider DP, Coyle AJ, Gutierrez-Ramos JC, Stämpfli MR, Jordana M. (2001) Temporal-spatial analysis of the immune response in a murine model of ovalbumin-induced airways inflammation. *American Journal of Respiratory Cell & Molecular Biology* 25(3):326-34.

18. **Ritz SA**, Gajewska BU, Stämpfli MR, Jordana M. (2000) Determinants of the immune-inflammatory response in allergic airway inflammation: Overview of antigen presentation and cellular activation. *Journal of Allergy & Clinical Immunology* 106(5 Suppl):S206-12.
19. Stämpfli MR, Cwiartka M, Gajewska BU, Alvarez D, **Ritz SA**, Inman MD, Xing Z, Jordana M. (1999) Interleukin-10 gene transfer to the airway regulates allergic mucosal sensitization in mice. *American Journal of Respiratory Cell & Molecular Biology* 21(5):586-96.
20. Stämpfli MR, Neigh GS, Wiley RE, Cwiartka M, **Ritz SA**, Hitt MM, Xing Z, Jordana M. (1999) Regulation of allergic mucosal sensitization by interleukin-12 gene transfer to the airway. *American Journal of Respiratory Cell & Molecular Biology* 21(3):317-26.
21. Stämpfli MR, **Ritz SA**, Neigh GS, Sime PJ, Lei XF, Xing Z, Croitoru K, Jordana M. (1998) Adenoviral infection inhibits allergic airways inflammation in mice. *Clinical & Experimental Allergy* 28(12):1581-90.

CONFERENCE PRESENTATIONS

1. Cavanagh A, **Ritz SA**, Shamsheri T, Sreeram P. (2018) Who is 'we'? Attending to similarity and teaching across difference in the university classroom. *Centre for Integrative Anti-Racism Studies Decolonizing Conference* (orall).
2. Cavanagh A, **Ritz SA**, Shamsheri T, Sreeram P. (2018) Teaching sex/gender and health: Critical reflections on power, identity, and social location in health sciences education. *Creating Spaces VIII: Annual Meeting of the Canadian Association for Health Humanities* (oral).
3. **Ritz SA**. (2016) Experimental thinking outside the (male/female) boxes: Theoretical and practical complexities of addressing sex/gender in basic biomedical research. *Feminist Epistemologies, Methods, and Metaphysics in Science Studies Conference* (oral).
4. Philips S, Juster R, Hamberg K, **Ritz SA**, Tudiver S. (2016) Research methods for studying sex. *Organization for the Study of Sex Differences 2016 Conference* (panel).
5. **Ritz SA**, Sharman Z, van Anders S. (2014) Leaps and bounds: Integrating gender, sex, and feminism in biomedical and bioscience policy and practice. *Science, Technology, & Gender: Challenges & Opportunities –Feminist Epistemologies, Methods, and Metaphysics in Science Studies Conference* (panel).
6. Mergler D, Nadeau G, Nicolakakis N, Power N, **Ritz SA**. (2014) Integrating sex and gender in ecohealth research: Development of new methodologies. *EcoHealth 2014 Conference* (panel).
7. **Ritz SA**. (2014) Using critical discourse analysis to explore expressions of ideology, identity, and privilege in medical learners. *Canadian Conference on Medical Education* (oral).
8. Chan L, **Ritz SA**, Corneil T, Elefante J. (2014) Integrating lesbian, gay, bisexual, and transgender (LGBT) health topics into the medical curriculum. *Canadian Conference on Medical Education* (workshop).
9. Bachiu J, Beatty K, **Ritz SA**, Ellaway R. (2014) Critical perspectives on assessment through social accountability lenses. *Canadian Conference on Medical Education* (workshop).

10. Ritz SA, Dumond J, Beatty K, Collins C. (2014) Developing initiatives in LGBTQ health education: Needs assessment & strategic approaches. *Canadian Conference on Medical Education* (poster).
11. Ritz SA, Beatty K, Dumond J. (2014) Creating LGBTQ-positive spaces in the classroom and the clinic. *Northern Constellations Faculty Development Conference* (workshop).
12. Ritz SA. (2013) Practicing medicine through a positional lens: Using critical discourse analysis to enhance reflexivity in medical learners. *Associated Medical Services Phoenix Project Meeting* (oral).
13. Ellaway RH, Ritz SA, Beatty K. (2013) Critical perspectives on quality improvement in medical education. *Canadian Conference on Medical Education* (workshop).
14. Fraleigh N, Ross BM, Ritz SA. (2012) T helper cell differentiation in the presence of nickel is modulated by estrogen. *International Conference on Advancing Excellence in Gender, Sex & Health* (oral).
15. Ritz SA, Antle D, Côté J, Deroy K, Fraleigh N, Messing K, Parent L, St-Pierre J, Vaillancourt C, Mergler D. (2012) Integrating sex and gender in basic experimental biomedical research: Opportunities, challenges, and tools. *International Conference on Advancing Excellence in Gender, Sex & Health* (poster).
16. Ellaway RH, Beatty K, Ritz SA. (2012) Accounting for social accountability: Developing critiques of social accountability within medical education. *Rendez-Vous 2012* (workshop).
17. Fraleigh N, Ross B, Ritz SA. (2012) Estrogen influences T cell differentiation in the presence of metals found in particulate air pollution. *Northern Health Research Conference* (poster).
18. Ritz SA, Antle D, Côté J, Deroy K, Fraleigh N, Mergler D, Messing K, Parent L, St-Pierre J, Vaillancourt C. (2012) Opportunities and challenges for integrating sex and gender considerations into basic experimental biomedical research. *Northern Health Research Conference* (oral).
19. Ritz SA, Ellaway RH, Beatty K. (2012) Framing 'social accountability' within medical education: Creating an open space for discourse. *Canadian Conference on Medical Education* (workshop).
20. Fraleigh NL, Lefebvre S, Khurana S, Ross B, Ritz SA. (2012) Metals present in particulate air pollution subvert inhalation tolerance and induce mild allergic sensitization in mice. *International Conference of the American Thoracic Society* (poster).
21. Ritz SA, Beatty K, Cotnoir C. (2012) Community partnerships to enhance LGBT health education at the Northern Ontario School of Medicine: Evaluation of a 1-day educational intervention for first and second year medical students. *Rainbow Health Ontario Annual Conference* (poster).
22. Lefebvre S, Khurana S, Fraleigh N, Ritz SA. (2011) Evaluating the effect of transition metal exposure on the expression of metallothionein in airway epithelial cell cultures: Challenging analysis of a difficult molecule. *Northern Health Research Conference* (poster).
23. Fraleigh N, Lefebvre S, Khurana S, Ritz SA. (2011) The effect of transition metals in particulate matter on allergic sensitization. *Northern Health Research Conference* (oral).

24. **Ritz SA**, Ellaway RH, Beatty K. (2011) Advancing 'social accountability' through critical literacy: How can we promote an understanding of power and privilege in medical learners? *Canadian Conference on Medical Education* (workshop).
25. White SM, Khurana S, Fraleigh N, McCartney KA, **Ritz SA**. (2010) Comparison of the biological effects of Sudbury Particulate Matter (SPaM) with other particulate types: Acute and chronic effects. *Northern Health Research Conference* (oral).
26. **Ritz SA**, Brummer CG. (2010) Effects of particulate air pollution on the development of autoimmune disease: Studies of ambient urban particulates and diesel exhaust particles in the NOD mouse model of Type 1 Diabetes. *International Conference of the American Thoracic Society* (poster).
27. Brummer CG, Ashick-Stinson C, Bulloch J, **Ritz SA**. (2009) Can exposure to particulate matter alter disease progression and autoimmune responses in an animal model of type 1 diabetes? *Northern Health Research Conference* (poster)
28. Bulloch J, Brummer CG, **Ritz SA**. (2009) Effects of particulate air pollution on airway antigen presenting cells: The role of oxidative stress in the activation of dendritic cells. *Northern Health Research Conference* (poster)
29. McCartney K, Spiers G, **Ritz SA**. (2008) Exposure to Sudbury Particulate Matter (SPaM) elicits pro-inflammatory cytokine expression in airway epithelial cells. *International Conference of the American Thoracic Society* (poster).
30. Dorman SC, Rohn PA, **Ritz SA**. (2008) Hypoxic and inflammatory changes in forest fire fighters after exposure to smoke. *International Conference of the American Thoracic Society* (poster).
31. Brummer C, McCartney K, Moreau N, Vincent R, **Ritz SA**. (2008) Chronic exposure to urban particulate matter accelerates autoimmune diabetes in NOD mice. *International Conference of the American Thoracic Society* (poster).
32. **Ritz SA**, Dorman SC. (2007) Increased red blood cell indices and platelet numbers after exposure to forest fires: Studies in forest fire fighters with the Ontario Ministry of Natural Resources. *Northern Health Research Conference*.
33. Brummer C, McCartney K, Moreau N, Vincent R, **Ritz SA**. (2007) Chronic exposure of NOD mice to ambient urban particulate air pollution accelerates the development of autoimmune diabetes: Pilot study. *Northern Health Research Conference* (poster).
34. Khanna N, North ML, **Ritz SA**, Silverman F, Scott JA. (2006) Air pollution and murine allergic asthma. *AllerGEN Trainees Annual Meeting* (oral).
35. Whitekus MJ, **Ritz SA**, Diaz-Sanchez D. (2005) Sulforaphane treatment abrogates the development of diesel-induced allergic responses in a mouse model. *Society of Toxicology Conference* (poster).
36. **Ritz SA**, Whitekus MJ, Jyrala M, Diaz-Sanchez D. (2005) The antioxidant sulforaphane inhibits the pro-allergic effects of diesel exhaust *in vitro* and *in vivo*. *International Conference of the American Thoracic Society* (poster).

37. **Ritz SA**, Lukacs N, Jordana M. (2003) Role of IL-10 in IL-4-independent Th2 polarization during respiratory mucosal sensitization. *International Conference of the American Thoracic Society* (poster).
38. **Ritz SA**, Lukacs N, Jordana M. (2003) IL-10 contributes to Th2 polarization in the absence of IL-4 in a murine model of respiratory mucosal sensitization. *Canadian Society for Immunology Conference* (poster).
39. **Ritz SA**. (2002) Liberatory immunology: Beyond the 'self/non-self' critique. *Canadian Women's Studies Association Conference* (oral).
40. Stämpfli MR, **Ritz SA**, Lei XF, Ohkawara Y, Xing Z, Jordana M. (1997) Adenovirus-mediated inhibition of allergic airways inflammation in mice. *International Conference of the American Thoracic Society* (poster). *American Journal of Respiratory & Critical Care Medicine* 155(4):A65.
41. **Ritz SA**, Stämpfli MR, Neigh GS, Gajewska B, Croitoru K, Jordana M. (1998) Inhibitory effect of adenovirus infection upon antigen-induced airways inflammation in mice is mediated by a non-CD8+, β 2-microglobulin-dependent cell type. *Keystone Symposium* (poster).
42. **Ritz SA**, Cundall MJ, Gajewska BU, Alvarez D, Stämpfli MR, Jordana M. (2001) IL-4-independent Th2 differentiation and function in GM-CSF-driven allergic respiratory sensitization. *Canadian Resident-Fellow Competition in Respiratory Research* (oral).
43. **Ritz SA** (2001) Evolution of a feminist paradigm of immune responsiveness: Polly Matzinger and the Danger theory. *Biology As If the World Mattered (BAItWorM) Conference* (oral).
44. Swirski FK, Gajewska BU, Alvarez D, **Ritz S**, Coyle AJ, Gutierrez-Ramos JC, Jordana M, Stämpfli MR. (2001) Differential expression of costimulatory molecules in tolerized mice. *International Conference of the American Thoracic Society* (poster). *American Journal of Respiratory & Critical Care Medicine* 163(5):A605.
45. Wiley RE, **Ritz SA**, Swirski FK, Gajewska BU, Alvarez D, Robbins C, Cundall MJ, Goncharova S, Stämpfli MR, Gutierrez-Ramos JC, Coyle AJ, Jordana M. (2001) Expression of the Th2-associated chemokine receptors CCR3 and CCR4 is detected by TaqMan analysis in mononuclear cells from the lungs of mice undergoing Th2 but not Th1 sensitization. *International Conference of the American Thoracic Society* (poster). *American Journal of Respiratory & Critical Care Medicine* 163(5):A749.
46. **Ritz SA**, Cundall MJ, Gajewska BU, Wiley RE, Swirski FK, Alvarez D, Manning S, Cwiartka M, Goncharova S, Gutierrez-Ramos JC, Stämpfli MR, Jordana M, Coyle AJ. (2001) Cytokine, costimulatory, and signal transduction molecule expression in Th1- and Th2-polarized models of airways inflammation by real-time quantitative PCR (TaqMan). *International Conference of the American Thoracic Society* (poster). *American Journal of Respiratory & Critical Care Medicine* 163(5):A749.
47. **Ritz SA**, Gajewska BU, Alvarez D, Cwiartka M, Coyle AJ, Stämpfli MR, Jordana M. (2001) Th2 polarization and function take place in the absence of IL-4 during respiratory mucosal sensitization in mice. *International Conference of the American Thoracic Society* (poster). *American Journal of Respiratory & Critical Care Medicine* 163(5):A607.

48. Gajewska B, Wiley RE, **Ritz S**, Swirski F, Snider D, Stämpfli M, Jordana M. (2000) OVA exposure in the context of Ad/GM-CSF leads to expansion of activated antigen-presenting cells and T lymphocytes. *International Conference of the American Thoracic Society* (poster). *American Journal of Respiratory & Critical Care Medicine* 161(3):A207.
49. Gajewska B, Swirski F, **Ritz S**, Snider D, Stämpfli M, Jordana M. (2000) Geography of the immune response in a model of ovalbumin-induced airways inflammation. *International Conference of the American Thoracic Society* (poster). *American Journal of Respiratory & Critical Care Medicine* 161(3):A206.
50. **Ritz SA**, Alvarez D, Cwiartka M, Gajewska BU, Stämpfli MR, Jordana M. (2000) Immunologic memory for eosinophilic inflammatory responses can be generated without interleukin-4, but airways hyperreactivity cannot. *International Conference of the American Thoracic Society* (poster). *American Journal of Respiratory & Critical Care Medicine* 161(3):A207.
51. Cwiartka M, Stämpfli MR, Gajewska BU, **Ritz SA**, Jordana M. (1999) IL-10 gene transfer inhibits eosinophilic airways inflammation in a model of mucosal sensitization. *Keystone Symposium* (poster).
52. **Ritz SA**, Cwiartka M, Neigh GS, Wiley RE, Stämpfli MR, Jordana M. (1999) IL-4 enhances, but is not necessary for, eosinophilic inflammation in murine allergic airways inflammation. *Keystone Symposium* (oral).
53. **Ritz SA**, Stämpfli MR, Neigh GS, Gajewska BU, Croitoru K, Jordana M. (1998) A non-CD8+, β 2-microglobulin-dependent cell type mediates inhibition of antigen-induced airways inflammation by adenovirus infection. *International Conference of the American Thoracic Society* (poster). *American Journal of Respiratory & Critical Care Medicine* 157(3):A826.
54. Stämpfli MR, **Ritz SA**, Lei XF, Xing Z, Croitoru K, Jordana M. (1998) Intramuscular adenoviral infection inhibits antigen-induced airways inflammation in mice. *International Conference of the American Thoracic Society* (oral). *American Journal of Respiratory & Critical Care Medicine* 157(3):A263.

BOOK REVIEWS

1. **Ritz SA**. (2004) Review of Immunobiology: The immune system in health and disease (6th edition), The Immune System (2nd edition), and Case studies in immunology: A clinical companion (4th edition). *Clinical Immunology* 113(3):345-6.

INVITED PRESENTATIONS

1. "Sex, Gender, and Research on the Microbiome." CIHR Canadian Microbiome Initiative 2 Strengthening Workshop, Montreal PQ, 2019.
2. "Incorporating Sex/Gender Considerations in the Human Immunology Initiative." CIHR Canadian Human Immunology Initiative Strengthening Workshop, Toronto ON, 2019.
3. "Beyond the Binary: Grappling with sex and gender in biomedical research." Dalhousie University, Halifax NS, 2019.

4. "The Odd Couple: Grappling with sex/gender considerations in experimental biomedical research." *Institute for Research on Women and Gender*, University of Michigan, Ann Arbor MI, 2017.
5. "Keynote Address – Moving beyond the male/female binary in biomedical research." *Feminist Research Institute Spring Symposium*, University of California – Davis, Davis CA, 2017.
6. "Promoting social accountability through critical pedagogy in medical education." *TenTalks to Celebrate Ten Years at NOSM*, Northern Ontario School of Medicine, Thunder Bay & Sudbury ON, 2016.
7. "Critical discourse analysis as a curricular intervention in medical education: Fork in the road." *Centre for Education Research & Innovation Research Seminar*, Schulich School of Medicine & Dentistry, University of Western Ontario, London ON, 2016.
8. "On the integration of sex and gender considerations in basic experimental biomedical research." *Phronesis Lab Visiting Scholars 'Philosopher. Scientist. Citizen.' Series*, School of History, Philosophy, and Religion, Oregon State University, Corvallis OR, 2015.
9. "Integrating sex and gender in basic biomedical research." *CIHR Institute of Gender & Health*, webconference, 2011 (view at <http://hdl.handle.net/2429/41731>)
10. "Particulate air pollution and the immunobiology of the respiratory tract: A case where 'size matters' and 'less is more'." *Séminaire en Toxicologie/Environnement-Santé*, Université du Québec à Montréal, Montréal QC, 2005.
11. "Diesel, particles, and cardiovascular health: The toxicological perspective." *International Conference on Work Environment and Cardiovascular Health*, Newport Beach CA, 2005.
12. "Sensitization & the City: Can pollution cause allergy?" *Allergy & Immunology Rounds*, McMaster University, Hamilton ON, 2004.
13. "The environment, GM-CSF, and asthma." *Division of Clinical Immunology & Allergy, UCLA School of Medicine*, Los Angeles CA, 2003.
14. "Can GM-CSF trigger asthma?" *Women's & Infant's Hospital of Rhode Island*, Providence RI, 2003.
15. "Women, the environment, and the immune system." *Meeting on Women's Environmental & Occupational Health Research in Canada*, Université du Québec à Montréal, Montréal QC, 2003.
16. "Taking another look at the role of GM-CSF in asthma." *Laboratory of Allergic Disease, National Institutes of Health*, Rockville MD, 2002.
17. "The macroimportance of the pulmonary microenvironment." *American Society for Gene Therapeutics Conference*, Boston MA, 2002.

MEDIA INTERVIEWS

1. Interview on addressing sex in research with laboratory animals, *National Public Radio*, Rae Bichell, 5 January 2016.

2. Interview on NIH policy on inclusion of male and female materials in pre-clinical research, *BuzzFeed Science*, Azeen Ghorayshi, 9 Nov 2015.

EXTERNAL RESEARCH FUNDING

1. **Ritz SA** (nPI), with co-applicants D Bowdish, L Greaves, A McArthur, PMcNicholas, D Sloboda, C Verschoor, G Metz, S Neil-Sztramko, C Vaillancourt, and J Wither. (2020) Gender/Sex Across the Lifespan: Embracing Complexity in Biomedical Research. *Canadian Institutes of Health Research – LOI for Standardization Platform*, \$20,500.
2. Levings, MK (PI) with co-applicants SA Crome, C Panagiotopoulos, **SA Ritz**, BC Verchere, DK Wherrett. (2019-2023) Innate and adaptive immune regulation in human type 1 diabetes. *Canadian Institutes of Health Research – Team Grant: Human Immunology Initiative*, \$800,000.
3. Levings, MK (PI), with co-applicants J Bramson, C Des Rosiers, J Dutz, E Haddad, S Ivison, J Kimmelman, S Lesage, A Prat, J Rioux, **S Ritz**, S Turvey, S Vercauteren, J Wither. (2018-23) Canadian Autoimmunity Standardization Core (CAN-ASC). *Canadian Institutes of Health Research – Team Grant, Human Immunology Initiative*, \$1,500,000.
4. **Ritz SA** (PI). (2013-16) Practicing medicine through a positional lens: Using critical discourse analysis to enhance reflexivity in medical learners. *Associated Medical Services – Phoenix Project*, \$20,000.
5. **Ritz SA** (PI). (2012-13) Integrating sex and gender considerations at the laboratory bench: A colloquium for experimental biomedical researchers. *Canadian Institutes for Health Research Meeting Grant*, \$25,000.
6. **Ritz SA** (PI). (2011-13) Effect of metals present in particulate air pollution on the development of inhalation tolerance in mice. *Ontario Thoracic Society*, \$45,000.
7. **Ritz SA** (PI). (2009-11) Comparison of particulate air pollution from industrial cities in Ontario: Chemical composition and biological effects. *National Science & Engineering Research Council Discovery Grant*, \$18,000.
8. **Ritz SA** (PI). (2009-11) Does air pollution exposure affect the development of type 1 diabetes? Experimental studies in NOD mice. *Canadian Institutes of Health Research Pilot Projects Grant*, \$83,335.
9. Mergler D (nominated PI), Balka E (co-PI), Lippel K (co-PI), Messing K (co-PI), **Ritz SA** (co-PI). (2008-13) Integrating gender and sex in health and environment research: Development of new methodology. *Emerging Team Grant, Canadian Institutes of Health Research*, \$1,000,000.
10. **Ritz SA** (PI). (2006-07) Assessing the effects of particulate air pollution on airway dendritic cells. *Banting Research Foundation*, \$20,000.
11. **Ritz SA** (PI). (2006-07) Effects of particulate air pollution on airway antigen-presenting cells: Roles of oxidative stress and GM-CSF in the activation of dendritic cells. *Ontario Thoracic Society*, \$32,080.

OTHER SCHOLARLY ACTIVITY

Senior Mentor, CIHR Institute of Gender & Health, 2018 – present.

Keynote Address, International Women in Science Day Conference, *McMaster University*, February 2018.

Scholar-in-Residence, School of History, Philosophy, and Religion, *Oregon State University*, February 2015.

Scientific Advisory Committee Member, “Sex and Gender Online Training”, *CIHR Institute of Gender & Health*, 2014 – 2016.

Conference Chair, “Integrating Sex & Gender at the Laboratory Bench”, *CIHR Institute of Gender & Health Meeting Grant*, 2013.

Core Faculty, *CIHR Institute of Gender & Health Summer Institute for Trainees*, 2011.

Working Group Chair, *Biology Working Group of the CIHR Team in Gender, Environment, & Health*, 2009 – 2015.

Conference Co-Chair, “Bodily Differences: Social & Scientific Technologies of Self-Making”, *Laurentian University*, 2009.

Panel Chair, “Minding Bodies: Women & Public Health”, *Thinking Gender 15th Annual Graduate Student Research Conference, University of California – Los Angeles*, 2005.

Invited participant, *CIHR Institute of Gender & Health International Think Tank on Gender, Sex, & Health*, 2003.

TEACHING

detailed teaching dossier available separately

CLASSROOM TEACHING

<u>Instructor</u>		
HTHSCI 3E03: Inquiry (Blood) (2017)	Bachelor of Health Sciences	
HTHSCI 2T03: Sex, Gender & Health (2018 - present)	Program	2017 -
HTHSCI 1G02*: Interdisciplinary Problem-Solving in Health (2019 – present)	McMASTER UNIVERSITY	present
HTHSCI 1X01* – Praxis Pathways 1 (2019 – present)	Hamilton ON	
<u>Lecturer</u>	NORTHERN ONTARIO SCHOOL OF	
Whole Group Sessions on immunology, allergy, haematology, small-group learning, research methods	MEDICINE	2005 -
	Sudbury & Thunder Bay ON	2016
<u>Problem-Based Learning Facilitator</u>	NORTHERN ONTARIO SCHOOL OF	
Topic-Oriented Sessions, Case-Based Learning	MEDICINE	2005 -
	Sudbury & Thunder Bay ON	2015
<u>Instructor</u>	Bachelor of Health Sciences	
Health Sciences 1E06: Inquiry	Program	
Health Sciences 4Y03: Science, Culture, & Identity	McMASTER UNIVERSITY	2004
	Hamilton ON	

CURRICULUM DESIGN & DEVELOPMENT

Research Curriculum Coordinator, *Pediatrics Residency Program*, NORTHERN ONTARIO SCHOOL OF MEDICINE, Sudbury & Thunder Bay ON, 2011 – 2015.

Basic Sciences Curriculum Coordinator, *Module 101: Introduction to Medicine*, NORTHERN ONTARIO SCHOOL OF MEDICINE, Sudbury & Thunder Bay ON, 2012-2014.

Member, *Population and Public Health Curriculum Committee*, NORTHERN ONTARIO SCHOOL OF MEDICINE, Sudbury & Thunder Bay ON, 2012-13.

Basic Sciences Curriculum Coordinator, *Module 109: Immunology & Haematology*, NORTHERN ONTARIO SCHOOL OF MEDICINE, Sudbury & Thunder Bay ON, 2005-11.

Member, *Curriculum Resources Committee*, NORTHERN ONTARIO SCHOOL OF MEDICINE, Sudbury & Thunder Bay ON, 2006-08.

Member, *Foundations of Medicine Curriculum Committee*, NORTHERN ONTARIO SCHOOL OF MEDICINE, Sudbury & Thunder Bay ON, 2005-08.

Curriculum design & facilitation, *Health Sciences 4Y03: Science, Culture, & Identity*, McMASTER UNIVERSITY, Hamilton ON, 2004-08.

Member, *Summer Science Camp for Aboriginal and Francophone Youth Curriculum Committee*, NORTHERN ONTARIO SCHOOL OF MEDICINE, Sudbury & Thunder Bay ON, 2007.

SUPERVISION OF TRAINEES

Natalie Moreau	Summer Research Medical Student	2006
Catharine Brummer	4 th Year Undergraduate Thesis Student MSc Chemical Sciences	2006-07 2007-11
Kati McCartney	MSc Chemical Sciences (co-supervised)	2006-09
Jane Bulloch	Research Intern (co-supervised) MSc Biology	2007 2007-10
Patricia Rohn	Research Intern (co-supervised)	2007-08
Vanessa Wall	Research Intern (co-supervised)	2007-08
Michael Wang	NSERC Summer Student (co-supervised)	2007
Erik Zannier	4 th Year Undergraduate Thesis Student	2007-08
Chloe Ashick-Stinson	4 th Year Undergraduate Thesis Student	2007-08
Sarah White	Summer Research Student 4 th Year Undergraduate Thesis Student	2009, 2010 2009-10
Tiff-Annie Kenny	Summer Research Student	2009
Nya Fraleigh	MSc Biology	2009 – 2015
Sandhya Khurana	Post-doctoral fellow	2009-10
Sebastien Lefevbre	Biotechnology Intern	2010-11
Cara Collins	Summer Research Medical Student	2013
Chanelle Frappier-Doyon	Summer Research Student 4 th Year Undergraduate Thesis Student	2013 2013 - 14
Joelle Thorgrimson	Summer Research Medical Student	2014
Tania Garrick	MA Gender Studies & Feminist Research	2015 - 2018
Puru Panchal	3H03 Research Student	2016 - 2017

Alice Cavanagh	MA Gender Studies & Feminist Research Independent Reading Course Major Research Paper supervisor	2016 - 2017
Padmaja Sreeram	3A15 Embedded Learning Experience Student (co-supervised)	2016 - 2017
Libby Schofeld	MA Gender Studies & Feminist Research Independent Reading Course	2019
Tahmina Shamsheri	MA Gender Studies & Feminist Research Independent Reading Course Major Research Paper supervisor	2019
Abhiti Kuhad	4A09 Thesis Student	2020 - 21

SUPERVISORY COMMITTEES

Vanessa Wall	MSc Biology	2006-07
Kaylyn Sutcliffe	MHK	2009-12
Sophie Joannisse	MHK	2009-11
Nicole Gauthier	MHK	2011 – 2016
Sam Peters	MSc Biology	2013 – 2015
Courtney Lessel	MSc Biology	2014 – 2016
Kristy-Anne Dube	MSc Biology	2015 – 2017
Alice Cavanagh	PhD Health Policy	2017 – present
Jennifer Williams	PhD Kinesiology	2019 - present

COMPREHENSIVE EXAMINATION COMMITTEES

Danielle Brabant	PhD Biomolecular Sciences	2007
Allison Buckner	PhD Biomolecular Sciences	2011 (chair)
Indeewari Lindamulage	PhD Biomolecular Sciences	2013
Alice Cavanagh	PhD Health Policy	2019

PROFESSIONAL & ADMINISTRATIVE SERVICE

At McMaster University

- Assistant Dean, Bachelor of Health Sciences (Honours) Program, Faculty of Health Sciences, 2015 – present.
- Faculty of Health Sciences Representative, Task Force on the Fall 2020 Virtual Learning Experience, 2020.
- Faculty of Health Sciences Representative, Undergraduate Council, 2020 – present.
- Faculty of Health Sciences Representative, Undergraduate Council Curriculum & Admissions Subcommittee, 2020 – present.
- Member, SMA3 Experiential Learning Metric Working Group, 2019 – present.
- Member, Undergraduate Council Ad Hoc Committee on Certificates, Diplomas, and Microcredentials, 2019 – present.
- Member, President's Advisory Committee on Building Inclusive Community, 2016 – 2017.
- Member, Health Sciences Education Council, 2015 – present.

Curriculum Coordination & Administration at the Northern Ontario School of Medicine

- Module Coordinator, MODULE 111: SYSTEMS BIOLOGY AND PALLIATIVE CARE, 2014 – 2015.
- Module Coordinator, MODULE 101: INTRODUCTION TO MEDICINE, 2006-09, 2011-13.
- Phase 1 (pre-clinical) Coordinator, 2008-11.
- Research Coordinator, PEDIATRICS RESIDENCY PROGRAM COMMITTEE, 2011 – 2015.
- Member, UNDERGRADUATE MEDICAL EDUCATION COMMITTEE, 2010 - 2014
- Member, HIDDEN CURRICULUM WORKING GROUP, 2011 – 2014.

Student Assessment & Program Evaluation at the Northern Ontario School of Medicine

- Vice-Chair, STUDENT ASSESSMENT & PROMOTION COMMITTEE, 2014 – 2015.
- Chair, STUDENT ASSESSMENT & PROMOTION COMMITTEE, 2010 – 14.
- Member, PROGRAM EVALUATION COMMITTEE, 2010 – 14.
- Chair, PHASE 1 ASSESSMENT WORKING GROUP, 2008 – 10.

Research Ethics Boards

- Member, NOSM UNDERGRADUATE RESEARCH ETHICS BOARD, 2014 – 2015.
- NOSM Representative, LAURENTIAN UNIVERSITY RESEARCH ETHICS BOARD, 2006 – 08.
- Graduate Student Representative, McMASTER ANIMAL RESEARCH ETHICS BOARD, 2000 – 03.

Faculty Representative

- Medical Sciences Division Representative, NOSM ACADEMIC COUNCIL, 2012 – 2015.
- NOSM ORIENTATION WEEK PLANNING COMMITTEE, 2012 – 2014.
- NOSM ORGANIZATIONAL EFFECTIVENESS WORKING GROUP, 2013 – 2014.
- NOSM STUDENT SOCIETY TRAVEL FUND ALLOCATION COMMITTEE, 2008 – 12.
- NOSM EAST JOINT OCCUPATIONAL HEALTH & SAFETY COMMITTEE, 2006 – 12.
- NOSM STUDENT AWARDS & BURSARIES COMMITTEE, 2005 – 12.
- NOSM FACULTY PERSONNEL COMMITTEE, 2007 – 09.

Accreditation

- *LCME/CACMS Accreditation of the NOSM MD Program:*
 - Prepared documentation and represented NOSM during accreditation site visits, 2008, 2011, 2013.
 - EDUCATIONAL PROGRAM SUBCOMMITTEE Member, 2008 & 2011.
 - Accreditation Report Editor, 2008.
- *Royal College Accreditation of the NOSM Pediatrics Residency Program:*
 - Prepared documentation on the research curriculum for site visit, 2014.
- *McMaster University – Life Sciences IQAP Panel (2017)*
 - Internal Reviewer
- *University of Manitoba – Program Review, BHSc/BHSt Programs (2018)*
 - External Reviewer

Representing NOSM to External Bodies

- LAURENTIAN UNIVERSITY COMMITTEE ON GENDER AND SEXUALITY, 2013 – 2015.
 - Interim co-Chair, 2014
- ONTARIO THORACIC SOCIETY - RESEARCH ADVISORY COMMITTEE, 2006 – 2015.
- GENDER ISSUES COMMITTEE - COUNCIL OF FACULTIES OF MEDICINE OF ONTARIO, 2007-09.
- EQUITY, DIVERSITY, & GENDER SPECIAL RESOURCE GROUP - ASSOCIATION OF FACULTIES OF MEDICINE OF CANADA, 2007-09.

Other Administrative and Service Activities

- Faculty Advisor, NOSM CHAPTER - MEDICAL STUDENTS FOR CHOICE, 2014 – 2015.
- Fire Warden, 2012 – 2015.
- Service to the Union
 - Member-at-Large, OPSEU LOCAL 677 UNIT 1 EXECUTIVE COMMITTEE, 2012 – 2015.
 - Faculty Representative, OPSEU LOCAL 677 UNIT 1 NEGOTIATING COMMITTEE, 2011 & 2015
 - OPSEU Unit 1 Representative, SCHOLARSHIP REVIEW COMMITTEE, 2013.
- Co-Coordinator, MEDICAL SCIENCES DIVISIONAL SEMINAR SERIES, 2006-09.
- Chair, INTEGRATED COMMUNITY EXPERIENCE RECONSIDERATION COMMITTEE, 2006-09.

PEER REVIEWER

- Advances in Health Sciences Education
- Archives of Environmental Contamination & Toxicology
- BMJ Open
- Canadian Institutes for Health Research – College of Reviewers
- CIHR Peer Review Committee – Sex, Gender & Health (Fall 2018)
- Canadian Medical Education Journal
- Clinical Immunology
- Environmental Research
- European Respiratory Journal
- Feminism & Psychology

- Gendered Innovation Project
- International Conference on Advancing Excellence in Gender & Health
- Pulmonary Pharmacology & Therapeutics
- Scholar & Feminist Online

HONOURS & AWARDS

“40 UNDER FORTY” AWARD, Northern Ontario Business, 2013.

ALAN BLIZZARD AWARD FOR COLLABORATIVE TEACHING (team award with the McMaster BHSc Inquiry Teaching Faculty), Society for Teaching & Learning in Higher Education, 2005.

PRESIDENT’S AWARD FOR COURSE OR RESOURCE DESIGN (team award with the McMaster BHSc Inquiry Teaching Faculty), McMaster University, 2005.

GRADUATE STUDENT AWARD, Canadian Society for Immunology & Cedarlane Canada, 2003.

MEMORIAL SCHOLARSHIP, IODE Canada, 2002.

DR. JOSEPH MILIC-EMILI AWARD FOR BEST BASIC RESEARCH PRESENTATION, Canadian Resident-Fellow Competition in Respiratory Research, 2001.

DOCTORAL FELLOWSHIP, Canadian Institutes for Health Research, 1999-2002.

PROFESSIONAL FELLOWSHIP, Canadian Federation of University Women, 1998.

COMMUNITY ACTIVITIES

FalconWatch Volunteer, *Hamilton Community Peregrine Project*, 2018.

Client Representative, *Clinical Practice Guidelines Development Group, Association of Ontario Midwives*, 2013 – 2015.

Member, *Sudbury District Science Fair (Executive Committee and Awards Subcommittee)*, 2009 – 2015.

Invited Speaker, *Canadian Federation of University Women – Sudbury Chapter*, October 2013.

Volunteer Judge, *Sudbury District Science Fair*, 2007 – 2012.

Panelist, *CIHR-Science North “Café Scientifique”*, 2010 and 2011.

Steering Committee Member, *Clean Air Sudbury*, 2006-09.

McMaster University



**EXTERNAL REVIEWERS'
REPORT ON PROPOSED
MIDWIFERY MASTERS DEGREE
PROGRAM**

16TH JULY 2021

**PROFESSOR MICHELLE BUTLER AND
PROFESSOR JAYNE MARSHALL**

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CONTACT INFORMATION

If you have any questions regarding the program's IQAP, inquiries can be directed to igap@mcmaster.ca.

UNDERGRADUATE PROGRAMS

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GRADUATE PROGRAMS

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MEETING INFORMATION

It is required that all reviewers visit at the same time, normally for two days. As appropriate, the review team shall meet with the following:

- Chair or Director;
- Full-time faculty members (in groups);
- Part-time faculty members (in groups);
- Program students
- Associate Dean;
- Dean;
- Associate Vice-President (Faculty);
- Provost and Vice-President (Academic), if available;
- Additional meetings may be scheduled at the request of the external review team, Chair of the department or individuals.

REVIEWERS' REPORT

The review team will submit, to the Office of the Vice-Provost (Faculty), a joint report, including an Executive Summary, for the program(s) under review, normally within four weeks of the visit. The review team's report should address the substance of both the Program Proposal and the evaluation criteria set out in the Program Proposal. The intent of these reports is to be formative and constructive. The reports are intended to provide counsel rather than prescriptive courses of action. The Office of the Vice-Provost (Faculty) will circulate the report to the appropriate Chair(s) and Dean(s).

Based on information gained from the on-site review, the Program Proposal, consultation with members of the program and the University, independent assessments and all material submitted as part of the program review, the review team is expected to provide feedback on the following evaluation criteria and list any recommendations relevant to that section. However, the review team is not restricted to the following issues/questions.

1. PROGRAM

Comment on the consistency of the program with McMaster's mission and academic plan; whether the program learning outcomes are clear, appropriate and aligned with the undergraduate or graduate Degree Level Expectations.

McMaster's Current Priorities and Strategic Mandate Agreement should be at the forefront of program design. This information can be found in the links provided below:

- i. **McMaster's Strategic Mandate Agreement:**
http://www.mcmaster.ca/vpacademic/documents/SMA_2014_McMaster_Agreement.pdf
- ii. **McMaster's current priorities:**
http://www.mcmaster.ca/presidentsoffice/documents/Letter_Forward_with_Integrity_21Sep11.pdf

The **four priorities** outlined in the Forward with Integrity letter:

- a) The Student Experience
- b) Community Engagement
- c) Research
- d) Internationalization

Comments:

The program proposal (Section 1.3) clearly sets out its purpose building on McMaster's mission and academic plan, focusing specifically on a single health profession (midwifery). As detailed in the McMaster's Strategic Mandate Agreement, the program draws on scholarship from the fields of business and health management, social sciences, epidemiology, health sciences, health policy and builds on the midwifery body of knowledge. Its aim is to support the development of midwives' skills and competencies that are directly applicable to the roles that graduates assume, preparing them to apply new knowledge to lead innovation and contribute to improvements in the health care system that addresses pressing and emerging challenges. The program is to be facilitated within the Faculty of Health Sciences, building on the existing Midwifery Education Program and adding a new graduate level program to the Faculty's portfolio.

There is also detail of how the Master's degree in Midwifery aligns with McMaster University's current institutional priorities which include: *Innovation in teaching and learning excellence, Access and equity, Research excellence and impact and Innovation, economic development and community engagement.*

Section 1.4 clearly articulates the seven program learning outcomes that appear to align with the Master's degree level expectations, namely: *Depth and breadth of knowledge Research and scholarship, Application of knowledge, Communication Skills, Awareness of limits of knowledge and Autonomy and professional capacity.* These details are also apparent in the Curriculum Map (Section 5.2).

Student Experience

We met with a range of midwives, some graduates of the Midwifery Education Program (MEP) at McMaster and others had undertaken a masters program elsewhere in alternate disciplines or stand-alone module. They all spoke highly of the need for a masters program in midwifery and welcomed the option of studying part-time as this would enable midwives to continue practising in their various roles, but felt it would be more challenging to undertake full-time, particularly for

those with families. With the covid-19 pandemic influencing a move to asynchronous delivery of learning, the midwives recognized the value of remote learning in improving accessibility and flexibility. The midwives also stated that this program could be attractive to marginalized midwives, those working in remote areas and international midwives.

A few of the midwives stated that the proposed masters program would improve their research knowledge and skills as this was not fully appreciated when they undertook their undergraduate program. The McMaster Midwifery Research Centre (MMRC) was highly thought of in terms of research teaching and support by those who had been exposed to real-world research opportunities within the centre.

The proposal includes the recruitment of a full-time administrator for the program, with additional ad-hoc administrative support as required. The current administrative team have considerable experience in all aspects of student support and will be an important source of advice and onboarding support for the new staff to be recruited.

Community Engagement

This program is highly relevant to community engagement, supporting the development of midwifery leadership, which is identified as a strategic priority by the International Confederation of Midwives and is linked to the successful expansion of the profession and growth in the midwifery workforce. This is highly relevant to the development of midwifery practice and growth in the midwifery workforce in Ontario and Canada. This in turn is likely to benefit women and communities, supporting the expansion of midwifery care, and continuity of care for women and their families. The proposal presents national and international support for the need to extend midwifery practice to include family planning and other sexual and reproductive health services.

The proposal includes a range of courses that will enable midwives from a range of backgrounds to further develop their scope of practice. This will support them in serving the communities in which they practise, particularly in improving access to sexual and reproductive health care for marginalized women. The program includes courses on social justice, leadership and research with a strong emphasis on developing midwives' leadership and research knowledge and skills to strengthen service improvements in reducing inequalities in maternity and health care provision, uptake and outcomes.

A particular case is made for supporting indigenous and non-indigenous midwives to develop leadership skills that will enable them to make meaningful contributions to addressing societal inequalities in access to sexual and reproductive health care. The core research module also focuses on research knowledge and skills required for outcome assessment and program evaluation.

Research

It is proposed that all midwives on this program will undertake a core research course, but a pre-requisite is that they all should have completed an undergraduate research course. This should ensure that those studying the course-based program option also have a good foundation of

research knowledge and skills to evaluate the body of evidence to influence innovation in practice and service improvements, and to evaluate the outcomes of their practice. Those deciding to study the thesis-based option will be expected to undertake an additional research course and a study focusing on pertinent maternity / health care issues that should have some impact in improving midwifery practice and birth outcomes. The thesis-based pathway will enable students with a particular interest in research to develop additional research knowledge, skills and experience.

All practical research elements could be used to explore real problems or issues that would be of benefit to midwifery practices, employers and/or communities.

Currently, there are no units/credits assigned to the thesis or capstone. This means it is difficult to know how comparable the program is to other masters programs.

Internationalization

The program is likely to appeal to international students. There is a particular appeal from the Canadian model of midwifery where midwives fulfil the full scope midwifery practice. This could be a particular draw for international students. The program set up will enable students to participate from across Canada, North America and worldwide

The structure and flexible delivery of the program is likely to be attractive to international students as well as to midwives in the whole of Canada and America, however it is not entirely clear as to how these students would undertake the course-based program, should they choose this option.

Specific Recommendations (where applicable):

- To develop a marketing strategy for national and international midwives.
- To consider apportioning units to the Thesis and Capstone so the program can be compared to other masters programs.
- To determine the number of credits the program offers to align to professional / academic requirements within the international context.
- To clearly define the entry requirements / pre-requisites for international students to access the program, such as language and contextualizing any cultural differences
- To consider how international students would undertake the practicum courses: e.g. supervised in their own country / vicarious liability etc.
- To develop a strategy to mitigate for students who may be challenged in accessing online materials and tutorial support due to internet accessibility and connectivity in remote areas
- To make the most of the potential benefit of research elements to practice or community contexts, students should be advised to discuss priorities for research within their own practices and communities at the beginning of the program to allow time for further discussion with their tutors about their potential for the independent study course and the thesis.

2. ADMISSION & ENROLMENT

Comment on whether the admission requirements (including any alternative requirements) are appropriately aligned with the program learning outcomes (and/or Degree Level Expectations) established for completion of the program.

Comments:

The program aims to target Canadian and international registered midwives on either a course-based or thesis-based option.

The admission requirements seem appropriate in that they include:

- A 4-year undergraduate degree in midwifery or international equivalent from an accredited university.
- An average B+ (77% minimum that is equivalent to a McMaster 8.5 grade point average in the first two years of study and
- A minimum of two years of full-time clinical experience as a practising midwife (or equivalent).

The *Facilitated Indigenous Admissions Process* enables indigenous midwives who have completed an indigenous midwifery education program, but not a university degree to also apply to this program.

Some of the courses on offer in this masters program are already in the university's midwifery education portfolio as stand-alone courses. It was clarified that this would be assessed on an individual basis should midwives wish to be accredited for prior learning. This would be dependent on the midwife providing an additional piece of written work to demonstrate how they are applying what they have learned to their everyday midwifery practice.

Specific Recommendations (where applicable):

- To make explicit reference to the entry requirements for those experienced midwives (pre-legislation) who do not hold a degree and may wish to undertake a masters degree: e.g. bridging course and review of transcript with a sample of their professional writing.
- To develop a process to recognize prior learning for midwives who have undertaken some of the listed skills courses as stand-alone courses, including determining the currency of the course at the time of application (e.g. two / five years).
- To consider the comparability of how the program maps to international midwifery masters programs in terms of equivalence and transferability of credit ratings.
- To ensure support mechanisms are available to candidates coming through the facilitated admissions processes to address any gaps arising from the alternative pathway and to ensure that they have an equal chance of succeeding on the program.

3. STRUCTURE

Comment on how the program's structure and regulations meet the specified program learning outcomes.

Comments:

The structure outlined for program administration, governance and communication is appropriate, including the establishment of advisory, curriculum, admissions, and student affairs committees.

Access to the program learning outcomes were available for this review, but specific details of the course specifications and assessment strategy are still to be drafted. Progression through the two program options is clear and appears logical.

The program is set out against a clear framework for full-time and part-time students. Students can enter on one of two streams – thesis-based or course-based. In the needs assessment, 44% of participants were interested in the thesis-based stream and 56% in the course-based stream.

The program includes five required courses (MIDWIF 700, 701, 702, 703 and 704) totally 12 units and either 6 units of electives plus a thesis or 12 units plus a Capstone portfolio. Two of these courses MIDWIF 700- *Leadership in the midwifery profession* and MIDWIF 704 – *Midwifery Leadership*, are resident.

In addition to the initial residency course (MIDWIF 700) all students are required to complete the mandatory School of Graduate Studies Courses (SGS 101 – *Research Integrity and Ethics* and SGS 201 – *Accessibility for Ontarians and Disabilities Act [AODA] Training*, and online *Indigenous Health Modules*), in the first term. *Critical appraisal of research* modules are also available.

A range of courses are outlined, including independent study, leadership placements and two Advanced midwifery clinical practicum which are all allocated study units ranging from 0.5 to 3 units. It is not clear as to how units are apportioned. The substantial pieces of work: the *Capstone portfolio* (MIDWIF 707) and the *Thesis* (MIDWIF 708) however, appear not to have any study units assigned, which would not be comparable to European academic programs where academic credits are awarded.

Students on the course-based stream can select elective courses from a wide range of options based around advanced midwifery skills and advanced midwifery clinical practicum. Some courses are existing or new standalone courses offered within the department; some are courses offered by other schools in the Faculty of Health Sciences. It is not clear how challenging it may be for students to combine courses carrying different study units/credits and or scheduling the ones they wish to take each semester. The capstone course (MIDWIF 707) does not have any units assigned to it.

Students on the thesis stream must take one additional 3-credit research methods course and can also choose to take a leadership placement or independent study (both carrying 3 units/credits). The thesis course does not have any units assigned to it.

There is a full-time option taking two years to complete whereas the part-time option would take three years, with students undertaking one course per term. On discussion with Faculty staff, it was confirmed that students could transfer between the two program options, but transferring from the thesis to course option was considered would be easier to organize than from course to thesis option.

The midwives we met with were supportive of the practice placements being undertaken one day per week as this would suit their own working practices and commitments. There was mixed opinion regarding the week's residency at the university and suggested a hybrid model may be more appropriate for those with families or living in remote areas.

Specific Recommendations (where applicable):

- To consider defining exit awards should a student withdraw with sufficient units / credits that may constitute a *postgraduate certificate* or *postgraduate diploma* to be comparable with international midwifery masters programs (equivalence and transferability).
- Identify which elective modules are available to students in each semester
- To develop a flow chart diagram to demonstrate the possibility of a student transferring from one program option to the other, particularly the course to thesis option.
- To identify how units are apportioned to each specific course
- To consider assigning study units for the Capstone portfolio and Thesis.
- To consider the benefit to students of having the second residency on campus, in terms of having a significant period of dedicated time to focus on their work and to engage with Faculty and build networks with staff, other students/future leaders.

4. CURRICULUM AND TEACHING

Comment on how the curriculum reflects the current state of the discipline or area of study; evidence of significant innovation or creativity in the content and/or delivery of the program; the appropriateness and effectiveness of the modes of delivery at meeting program learning outcomes; and how teaching in the program prioritizes areas of accessibility and removes barriers to learning.

Comments:

This proposed masters program that builds on the undergraduate MEP will be the only one of its kind in Canada, focusing on leadership, social justice and research within the midwifery context. Its purpose is to address the increasing professional demand to develop leadership and research capacity in Canada as well as internationally. The program will be supported by McMaster University's Midwifery Research Centre (MMRC) that will provide a rich interdisciplinary learning environment for midwives, particularly in research leadership, system transformation and ongoing quality improvement in maternity and health services. The skills courses, some of which will be developed from existing stand-alone courses, will enable midwives to extend their own scope of practice while also advancing midwifery, sexual and reproductive health care as well as support those in independent practice. These additional skills were identified through a needs analysis in Fall 2020 and in the pilot projects conducted in the Province of the expanded model of midwifery

care. They have also been identified as appropriate for advanced midwifery practice and required to provide the full range of sexual and reproductive health care by the ICM and WHO.

The online delivery and format of the program will be flexible to increase the accessibility of midwives in clinical practice who might otherwise be unable to engage in postgraduate studies while working and those living across Canada or in other countries and will include synchronous and asynchronous online formats, two mandatory residencies (one in-person and one online) and practicums. Placement electives are expected to be undertaken in area of the midwife's residence in order to reduce the need to travel and the consequential expense during the program. However the details as to how this would apply to international midwives was not explicit and requires some consideration. Letters of support for both clinical placement, including leadership placement opportunities are included in the program proposal and some of these were reaffirmed by personnel we met with during the review. It is not clear from the proposal how skills courses will be taught and assessed – e.g., face-to-face, fully online, or a mix of both.

There is detail of the principles that will be used to deliver the program in accordance with *McMaster's Guide to Inclusive Teaching* which include:

- A Black/Person of Colour (BPOC) Advisor appointed to support students during the program
- McMaster's Indigenous Student Services, Faculty of Health Sciences Indigenous Students' Office and the new Indigenous Learning Lodge to specifically support indigenous midwives
- Recognizing the challenges students might experience: e.g. technical issues and isolation, and establishing multiple, varied and proactive ways to support students in overcoming them
- Compositional diversity in faculty members who identify as indigenous and racialized
- Educational best practices for accessibility
- Compliance with the *Accessibility for Ontarians with Disabilities Act (AODA)* and the *McMaster University Accessibility Plan 2011-2025*
- Program staff and faculty will complete mandatory training provided by McMaster University regarding accessibility policies and practices

The proposal highlights that program is focused around leadership and this is clearly the case. The program begins with a residency which introduces students to key concepts on advanced practice and leadership, including leading self. This is followed by three courses which focus on different aspects of leadership for the midwifery profession and social justice and research for midwifery leadership. These are followed by a midwifery leadership residency. As these are core courses, they bring a primary focus on leadership throughout the program. Students in the course-based stream will then focus on advanced skills, and those in the thesis-based stream on a research thesis. Students begin the program by reflecting on their goals for the program and setting personal learning objectives. Students in the course-based stream will prepare a portfolio that includes a leadership vision statement and a final personal project based on one or more assignments conducted on the program. This should help to bring the focus back to leadership for students. However, it is not clear if the focus on leadership will continue for students in the thesis-based stream.

Specific Recommendations (where applicable):

- To clarify how skills courses will be delivered and assessed – e.g. fully online or mix of face-to-face and online.

- To consider how international midwives could undertake the practicum placements within their own country.
- Draw up a list of potential research modules that would be available to students on the program
- Ensure that the research course builds on, rather than repeats, basic concepts (e.g. ways of knowing). Consider including theoretical concepts relevant to innovation and evaluation in practice include implementation science, systematic and rapid reviews, guideline development.
- Consider including in the thesis guidance a requirement to link the thesis to leadership – e.g., set out the midwifery leadership context for the research in the background and/or literature review; refer to the implications for midwifery /midwifery leadership/ midwifery policy in the discussion section and /or conclusions.

5. ASSESSMENT OF LEARNING

Comment on the appropriateness and effectiveness of the proposed methods of assessment in demonstrating achievement of the program learning outcomes, as well as the extent to which the program(s) assess graduating student achievement of the program learning outcomes.

Comments:

There are seven learning outcomes within this program which have been mapped to the assessments spread across the two program options. The detail relating to assessment was limited within the documentation reviewed, but staff informed us that a range of methods would be used such as quizzes, examinations and presentations in addition to written course work. As far as assessing skill development in the practice settings, it was revealed that there would be a clinical portfolio to reflect the student's ability, providing evidence of competency in new skills so they can then undertake them in their own employing organization. The proposal notes that for some courses (MIDWIF711, 712, 713) students will complete a final synthesis assignment but it is not clear how students taking the remaining skills courses will be assessed.

The Master's assessment criteria was not available to assess comparability with our own university's standards.

Specific Recommendations (where applicable):

- To ensure the program learning outcomes are made explicit to each assessment
- To clarify how the skills courses will be assessed and that this correlates with the standard expected at masters level.
- To consult with stakeholders about the design of the Capstone Portfolio to ensure that assessment of competence and acquisition of advanced skills is compatible / recognized across all provinces in Canada and the international market.

6. RESOURCES TO MEET PROGRAM REQUIREMENTS

Comment on evidence that there are adequate human, physical and financial resources to sustain the quality of scholarship produced by undergraduate students.

Comments:

We were assured that there was sufficient investment for this new program: the first of its kind in Canada. With one of the three universities in the consortium in which McMaster sits, closing their midwifery program, investing in a master's program would seem highly appropriate at this time.

We gained an insight of the expertise from within the McMaster Midwifery Research Centre (MMRC) that would support the program. The faculty and adjunct faculty we actually met with were from a diversity of background and all appeared very committed to delivering this program and making it a success. Building faculty capacity in terms of academic and administrative support, on the current total of seven, will be key over the first few years of delivering the program. Although there will be faculty retiring in the next few years, there will also be others completing doctoral studies that will support the long term demands of the program. In addition, the midwives we met with stressed the value of the MMRC to support them in advancing their research knowledge and skills.

Prospective students felt it would be a challenge to undertake the program full-time and to self-finance for many midwives, particularly those who have families and live in remote areas and a distance away from the university. Some felt the course-based option would offer them more flexibility, but believed it may be more expensive as scholarships would only be available for the thesis option. Another issue raised was regarding the financing of any insurance to cover the practicums outside of their own area of practice which was not clear in the program proposal.

As a result of the Covid-19 pandemic, there has been a rapid move towards developing online courses which is an advantage for components of this program to be offered at a distance. Accessibility to the internet however, could be a challenge for midwives who live in remote areas and for international midwives.

Specific Recommendations (where applicable):

- To develop a strategy to recruit faculty that is representative of the diversity in population such as indigenous midwives.
- To develop a practical placement strategy for the leadership placement and two advanced midwifery clinical practicums, identifying the available capacity at any one time, the profile of the placement and the learning opportunities available to students.
- To consider equity of access regarding program fees for all modes of delivery: full time / part time and thesis option / course option.
- To clarify whether McMaster's insurance covers students on clinical placements.

7. QUALITY AND OTHER INDICATORS

Please provide commentary on the indicators the department will use over the first five years to document and to demonstrate the quality of the program.

Please comment on any evidence of how faculty members will ensure the intellectual quality of the student experience.

The indicators that the department could use over the first five years to document and demonstrate the quality of the program were clearly identified in Section 7.1 and appear appropriate. These include:

- Program-wide student-faculty meetings each term to receive feedback and address questions
- Informal requests for student feedback during courses
- Anonymous end of course student evaluations of courses and instructors
- In-program student satisfaction and experience surveys
- Alumni satisfaction and experience surveys
- Written and verbal feedback from instructors and preceptors teaching in the program

Additional metrics to document the academic quality of the program include:

- Number of scholarly presentations per student
- Number of scholarly publications per student
- Proportion of thesis students with at least one accepted thesis-related publication within one year of graduation
- Average time-to-completion for full-time students
- Average time-to-completion for part-time students

The evidence of how faculty members will ensure the intellectual quality of the student experience centers on the support provided by the MMRC through the expertise and experience of its staff. A variety of research focused opportunities will be available to the students on this program: research focused workshops, attendance at research / project meetings, informal mentorship from research staff and other students, an online repository of resources, support for developing research protocols and research ethics approval applications and annual research symposia for students to be exposed to high calibre research and showcase their own projects. The MMRC also offers students opportunities to participate in ongoing research projects that coincide with the aim of the master's program which is to develop leadership capacity and broader access to maternity care. Regular one-to-one meetings between students and their supervisor will help support student success and maintain student engagement with the program.

Existing faculty members are experienced in midwifery practice, research and administration to offer appropriate mentorship and academic supervision to students on this program. to support an all-inclusive curriculum, guest lecturers from a diversity of backgrounds will contribute to the program.

Elective courses within the program increase the customization to meet the needs of the individual student so they can focus on aspects that are more meaningful to their own context and development goals. Leadership and clinical placements including the option of an independent study elective, will enable students to fulfil their own learning objectives.

EXECUTIVE SUMMARY

Please provide an Executive Summary of the Reviewers' Report, which highlights the any recommendations being made to the program.

- To develop a marketing strategy for national and international midwives.
- To consider apportioning units to the Thesis and Capstone so the program can be compared to other masters programs.
- To determine the number of credits the program offers to align to professional / academic requirements within the international context.
- To clearly define the entry requirements / pre-requisites for international students to access the program, such as language and contextualizing any cultural differences.
- To consider how international students would undertake the practicum courses: e.g. supervised in their own country / vicarious liability etc.
- To develop a strategy to mitigate for students who may be challenged in accessing online materials and tutorial support due to internet accessibility and connectivity in remote areas.
- To make the most of the potential benefit of research elements to practice or community contexts, students should be advised to discuss priorities for research within their own practices and communities at the beginning of the program to allow time for further discussion with their tutors about their potential for the independent study course and the thesis.
- To make explicit reference to the entry requirements for those experienced midwives (pre-legislation) who do not hold a degree and may wish to undertake a masters degree: e.g. bridging course and review of transcript with a sample of their professional writing.
- To develop a process to recognize prior learning for midwives who have undertaken some of the listed skills courses as stand-alone courses, including determining the currency of the course at the time of application (e.g. two / five years).
- To consider the comparability of how the program maps to international midwifery masters programs in terms of equivalence and transferability of credit ratings.
- To ensure support mechanisms are available to candidates coming through the facilitated admissions processes to address any gaps arising from the alternative pathway and to ensure that they have an equal chance of succeeding on the program.
- To consider defining exit awards should a student withdraw with sufficient units / credits that may constitute a *postgraduate certificate* or *postgraduate diploma* to be comparable with international midwifery masters programs (equivalence and transferability).
- Identify which elective modules are available to students in each semester.

- To develop a flow chart diagram to demonstrate the possibility of a student transferring from one program option to the other, particularly the course to thesis option.
- To identify how units are apportioned to each specific course.
- To consider assigning study units for the Capstone portfolio and Thesis.
- To consider the benefit to students of having the second residency on campus, in terms of having a significant period of dedicated time to focus on their work and to engage with Faculty and build networks with staff, other students/future leaders.
- To clarify how skills courses will be delivered and assessed – e.g. fully online or mix of face-to-face and online.
- To consider how international midwives could undertake the practicum placements within their own country.
- Draw up a list of potential research modules that would be available to students on the program
- Ensure that the research course builds on, rather than repeats, basic concepts (e.g. ways of knowing). Consider including theoretical concepts relevant to innovation and evaluation in practice include implementation science, systematic and rapid reviews, guideline development.
- Consider including in the thesis guidance a requirement to link the thesis to leadership – e.g., set out the midwifery leadership context for the research in the background and/or literature review; refer to the implications for midwifery /midwifery leadership/ midwifery policy in the discussion section and /or conclusions.
- To ensure the program learning outcomes are made explicit to each assessment.
- To clarify how the skills courses will be assessed and that this correlates with the standard expected at masters level.
- To consult with stakeholders about the design of the Capstone Portfolio to ensure that assessment of competence and acquisition of advanced skills is compatible / recognized across all provinces in Canada and the international market.
- To develop a strategy to recruit faculty that is representative of the diversity in population such as indigenous midwives.
- To develop a practical placement strategy for the leadership placement and two advanced midwifery clinical practicums, identifying the available capacity at any one time, the profile of the placement and the learning opportunities available to students.
- To consider equity of access regarding program fees for all modes of delivery: full time / part time and thesis option / course option.

- To clarify whether McMaster's insurance covers students on clinical placements.

Category

Program

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Admission &
Enrolment

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Resources

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Resources

Resources

Recommendation from reviewers

To develop a marketing strategy for national and international midwives.

To consider apportioning units to the Thesis and Capstone so the program can be compared to other masters programs.

To determine the number of credits the program offers to align to professional / academic requirements within the international context.

To clearly define the entry requirements / pre-requisites for international students to access the program, such as language and contextualizing any cultural differences

To consider how international students would undertake the practicum courses: e.g. supervised in their own country / vicarious liability etc.

To develop a strategy to mitigate for students who may be challenged in accessing online materials and tutorial support due to internet accessibility and connectivity in remote areas

To make the most of the potential benefit of research elements to practice or community contexts, students should be advised to discuss priorities for research within their own practices and communities at the beginning of the program to allow time for further discussion with their tutors about their potential for the independent study course and the thesis.

To make explicit reference to the entry requirements for those experienced midwives (pre-legislation) who do not hold a degree and may wish to undertake a masters degree: e.g. bridging course and review of transcript with a sample of their professional writing.

To develop a process to recognize prior learning for midwives who have undertaken some of the listed skills courses as stand-alone courses, including determining the currency of the course at the time of application (e.g. two / five years).

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To consider defining exit awards should a student withdraw with sufficient units / credits that may constitute a postgraduate certificate or postgraduate diploma to be comparable with international midwifery masters programs (equivalence and transferability).

Identify which elective modules are available to students in each semester

To develop a flow chart diagram to demonstrate the possibility of a student transferring from one program option to the other, particularly the course to thesis option.

To identify how units are apportioned to each specific course

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To consider the benefit to students of having the second residency on campus, in terms of having a significant period of dedicated time to focus on their work and to engage with Faculty and build networks with staff, other students/future leaders.

To clarify how skills courses will be delivered and assessed – e.g. fully online or mix of face-to-face and online.

To consider how international midwives could undertake the practicum placements within their own country.

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Ensure that the research course builds on, rather than repeats, basic concepts (e.g. ways of knowing). Consider including theoretical concepts relevant to innovation and evaluation in practice include implementation science, systematic and rapid reviews, guideline development. Consider including in the thesis guidance a requirement to link the thesis to leadership – e.g., set out the midwifery leadership context for the research in the background and/or literature review; refer to the implications for midwifery /midwifery leadership/ midwifery policy in the discussion section and /or conclusions.

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To clarify how the skills courses will be assessed and that this correlates with the standard expected at masters level.

To consult with stakeholders about the design of the Capstone Portfolio to ensure that assessment of competence and acquisition of advanced skills is compatible / recognized across all provinces in Canada and the international market.

To develop a strategy to recruit faculty that is representative of the diversity in population such as indigenous midwives.

To develop a practical placement strategy for the leadership placement and two advanced midwifery clinical practicums, identifying the available capacity at any one time, the profile of the placement and the learning opportunities available to students.

To consider equity of access regarding program fees for all modes of delivery: full time / part time and thesis option / course option.

To clarify whether McMaster's insurance covers students on clinical placements.

Response from program

This will be done as part of the implementation work over the next year.
It is not the norm at McMaster to assign units to these program components.
We will consult with our International Office and will develop content that will be available on our website to describe the expectations for these activities to address the reviewers underlying concern re: ease of assessing international comparability of the program.

See comment above.

This will be done as part of the implementation work over the next year.

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This will be done as part of the implementation work over the next year. We will use technologies that rely on the lowest bandwidth possible.
Asynchronous delivery for most courses will also minimize acute challenges related to connectivity.

This is what we had envisioned for student's independent projects for the capstone portfolio. Students will be guided during the first residency to begin discussions to identify research priorities early to inform their projects. Planning for thesis topics will also begin early, but will primarily be determined based on the research program of the supervisor.

This will be done as part of the implementation work over the next year.

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This will be done as part of the implementation work over the next year.
Units have been apportioned to the proposed courses based on the anticipated workload (approximate hours) associated with each course using McMaster norms. We will include an explanation of this in the information available to prospective and current students, as well as in the information that we develop and share to address the issue raised by the reviewers regarding international equivalency.
As mentioned above, it is not the norm at McMaster to assign units to these program components. We will develop content that will be available on our website to describe the expectations for these activities to address the reviewers underlying concern re: ease of assessing international comparability of the program.

We will consider this suggestion, and will evaluate the approach that we select (gathering feedback from student and faculty) so that we can reflect on the approach we initially take and adjust if appropriate.

This varies by course. We will add more detailed description of each course to the materials that are publicly available on the program website as part of the implementation work over the next year.

This will be done as part of the implementation work over the next year.

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We will ensure that we follow this recommendation as we develop the full syllabi for the courses over the next year.

We will implement this suggestion.

We will implement this suggestion when we prepare the course syllabi over the next year.

Each of the skills courses that already exist as a continuing education course will have an additional assignment added that ensures that students are engaging with content at a masters level. Details will be described in course syllabi that will be developed over the next year.

We will implement this suggestion.

The Midwifery Education Program has a strategy to recruit faculty that is representative of the diversity of the population that applies McMaster University's Human Resources '*Recruiting for Diversity*' approach (<https://hr.mcmaster.ca/managers/hiring-recruitment/recruiting-for-diversity/>). We will apply this in recruiting faculty who will teach in the master's program.

This will be done as part of the implementation work over the next year.

We have set the fees so that the total cost for the degree will be the same for full time and part time students, and for both degree options. Part time students will be able to continue to work while completing the program, which will support accessibility. We plan to support students to access scholarship or bursary funding as much as possible. We are seeking approval of the degree to ensure that students can access student loans.

As part of the implementation work over the next year, we will clarify the coverage available for student placements, and will investigate any limits to insurance coverage (e.g., out of province & out of country placements).

September 9, 2021

Dr. Douglas Welch
Vice-Provost and Dean of Graduate Studies
Gilmour Hall, 212, McMaster University
1280 Main St. West
Hamilton, ON L8S 4K1

Re: Midwifery MSc Program-Dean's letter

Dear Doug,

We thank Professors Michelle Butler and Jayne Marshall for their thoughtful review of our proposal for a new MSc program in Midwifery. Dr. Darling and her colleagues have clearly articulated the rationale for the program as response to the need for midwives in Canada and internationally to acquire competencies related to leadership in clinical practice, research, and knowledge mobilization. The program has the potential to advance the practice of midwifery by developing the leaders of its future and aligns closely with the priorities for the advancement of clinical research and evidence-based clinical practice. We believe that the program will be of great interest to some practicing midwives. We note how the program explicitly recognizes the need to serve midwives and their clients from indigenous and other marginalized communities and we see this as a key aspect of the rationale.

Professors Butler and Marshall have made many constructive suggestions where further development and clarity are required. We have reviewed Dr. Darling's response and we are confident that she will address these suggestions as the program details are finalized. Although it is to be expected that many important details are yet to be worked out, we wish to highlight some key uncertainties that need to be resolved to ensure the success of the program.

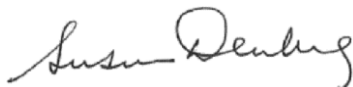
1. We believe that the success of the program may depend on robust *international enrolment* to ensure that the program can be sustained at a size that is viable and worthwhile. The review identifies some key questions about international students. For example, it is unclear how international placements will work. But more importantly, international marketing and recruitment is a demanding enterprise. It will be necessary to articulate the resources and strategies that will support it.
2. The review raises questions about the extent to which *fulltime registration* is realistic, and how this may limit the *practicability of the thesis stream*. We agree that a thesis stream is a desirable strategy to advance research and to support the career development of faculty in midwifery. A vibrant thesis stream is most likely when students can undertake fulltime study, supported by well-funded research programs. The current faculty complement in midwifery is small, and there is a lack of experienced

supervisors. We believe that there is good justification for a course-based program, with a thesis-based stream that ramps up over time.

3. The reviewers state that they “were assured that there was *sufficient investment* for this new program” and go on to note how important it will be to “build faculty capacity over the first few years” of the program. It is important to clarify the resource considerations for graduate programs in the Faculty of Health Sciences. It is expected that any new graduate program is financed from the revenues it generates. This can be challenging in the current planning environment in Ontario, where government funding for education is frozen. It is further challenging for a program that aims to serve a significant number of students from marginalized communities and if the potential for international enrollment with high tuitions is unclear. It is particularly important in this regard that such a program has a clear commitment from a home department with a diversified budget and a willingness to manage financial risk.

We will work with Dr. Darling and her colleagues to resolve these key questions over the next few months, and prior to any final decision to launch the program.

With regards,



Susan Denburg
Executive Vice-Dean and
Associate Vice-President, Academic
Faculty of Health Sciences



Steven Hanna
Vice-Dean and
Associate Dean of Graduate Studies
Faculty of Health Sciences

cc: Christina Bryce, Assistant Graduate Secretary
Stephanie Baschiera, Associate Registrar and Graduate Secretary
Dr. Liz Darling, Director/Assistant Dean, Midwifery Education Program

September 2021 Graduate Council

Trust Fund Change

Name of Trust Fund: DSB Management Information Systems Scholarship

Original award terms: Established in 1999 by the Faculty of Business. Preference will be given to students entering the MBA program, specializing in Management Information Systems who demonstrate a high degree of scholarship.

TFOC Approved Change: Established in 1999 by the Faculty of Business. Preference will be given to students in the MBA program, specializing in Business Analytics who demonstrate a high degree of scholarship.