## **Publisher's Note**

Dr. Dorothy Pringle has completed her time as editor-in-chief of this journal. She would now like some time to herself and time with her family. In predictable fashion, she has prepared her successor well, and we can build on her work and her reputation in the years to come. We will sorely miss her. Husband Jack will be happy for extra time together.

We can all revel in the fact that Dot has made her mark. Although she has many accomplishments to her name, two that will live forever are the words she has written and the students she has taught. I've heard about her teaching, but I know something about her writing. She has demonstrated the power of the word – essential to her commitment to knowledge translation. Her writing will endure. The Canadian Institutes of Health Research defines knowledge translation as a dynamic and iterative process that includes synthesis, dissemination, exchange and ethically sound application of knowledge to improve the health of Canadians, provide more effective health services and products and strengthen the healthcare system (CIHR 2009). Dot's special contribution to knowledge translation is her deep understanding of our readers, the nursing profession and its role in the complex service of healthcare.

In the real world an editor's job is to create and keep readers. To do so successfully, she needs to understand them intimately. Dot does. She also understands the complex system of interactions between researchers and knowledge users that may vary in intensity, complexity and level of engagement. Dot has contributed to that system elegantly. She has edited with purpose and written editorials with passion. She has mentored her successor at the journal. She remains heavily involved in nursing issues – most recently, as lead on the multifaceted government-driven project "Health Outcomes for Better Information and Care." In the journal, she has defined the research that nurses should undertake to stay relevant and has complained, with a touch of irritation, when these topics weren't on anyone's agenda – or, for that matter, on everyone's. In every issue, she has championed nursing and recognized the extraordinary contributions that the profession makes at home and internationally. Her editorials have brought serious issues to the fore so that policy makers and care organizations can take note. She has also reminded nurses of their failures. She cares.

We know that Dot's work has been the product of concentrated dedication that normally goes into packaging fine jewels, great paintings and the significant books that withstand the test of time. Readers care about that kind of thing. Readers come back for hopeful expectations. Dot understands that, and she has abundantly delivered.

Each of Dot's 24 editorials remains online and in print. They will endure. We will assemble them and make them into a book. Watch for it. It will be on our best-read list for a long time.

Our readers, our authors, our reviewers, our managing staff, our designers and our publishers have watched her with admiration and have been honoured to work with her. Readers will refer to her regularly. The Academy of Canadian Executive Nurses has been well served by her editorship.

We thank you Dot. We will miss you – and we will call you.

## References

Canadian Institutes of Health Research (CIHR). 2009 (May 8). *About Knowledge Translation*. Retrieved January 27, 2010. <a href="http://www.cihr-irsc.gc.ca/e/29418.html">http://www.cihr-irsc.gc.ca/e/29418.html</a>.

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## **Letter to the Editor**

[Re: A Return to Diploma-Prepared Registered Nurses, by June F. Kikuchi 22(3)]

As president of the Canadian Nurses Association (CNA), I feel compelled to address some of the arguments that Dr. Kikuchi has raised in her paper.

I agree with her conclusion that hands-on nursing care is the "difference that makes a difference" in healthcare and that the role and responsibility of an RN require a minimum of a baccalaureate degree. Our opinions differ, however, when the author suggests that the RN profession is on a slippery slope that will lead it away from hands-on care through the delegation of more of this work to practical nurses (PNs). She follows this suggestion with the prediction that the PN designation will eventually be replaced and become a diploma-level RN. In fact, 89% of RNs with a baccalaureate degree work with clients in direct care, according to