MINNESOTA NURSING
A publication of the University of Minnesota School of Nursing

Study Explores Expanded Role for School Nurses in Obesity Prevention

All Fiber Is Not Created Equal

Venture Capital for Research

INSIDE:

▸ Study Explores Expanded Role for School Nurses in Obesity Prevention
▸ All Fiber Is Not Created Equal
▸ Venture Capital for Research

University of Minnesota
School of Nursing
Driven to Discover™

Signs of an Epidemic
Students, Alumni and Faculty
Lead Population Health Efforts
Study Explores Expanded Role for School Nurses in Obesity Prevention
Data Indicates 1 in 3 School-Aged Children is Overweight, Obese

All Fiber Is Not Created Equal
Psyllium Fiber Found to be Significantly More Effective

Venture Capital for Research
Clinical Translational Science Institute at the University of Minnesota Supports Nurse Scientists

Signs of an Epidemic
School of Nursing Students, Alumni and Faculty Lead Population Health Efforts

Building on Strengths
Leslie Morrison Named Finalist for New Investigator Award

Supporting Weight Loss
PhD Candidate Julie Sabo Studies Social Support Methods That Help Nurses Lose Weight
School of Nursing Celebrates Opening of Nurse-Led Clinic

The School of Nursing celebrates the opening of the University of Minnesota Health Nurse Practitioners Clinic in Minneapolis. The opening of the clinic was led by Assistant Dean Tom Clancy, PhD, MBA, RN, FAAN, and Clinical Assistant Professor Jane Anderson, DNP, RN, FNP.
Empowered Communities Are Typically Healthier Communities

It is no surprise that groups possessing resources and access to accurate information have the capacity to influence their health more than those who do not. In West Africa, the Ebola virus spread rampantly where communities lacked trusted information about the cause of the disease and how it was transmitted. This was a stark reminder that the lack of accurate information is often at the root of health disparities.

In the case of Ebola, nurses and other health care workers from West Africa and aid agencies around the world bravely stepped up to educate, communicate, and ultimately, working with communities, stop the virus in its tracks.

In this issue, you will read about the engagement of students, faculty and alumni in this particular public health emergency. Their stories illustrate a much broader narrative of how the nursing profession continues to evolve and grow from its ancient roots as compassionate responder to its role in leading and advancing community health and wellness.

Readers will also learn about a unique childhood obesity prevention study - the first of its kind - testing a healthy weight management program led by school nurses. The program equips families, children and school personnel with information, support and resources to achieve optimal health.

At this School of Nursing, we advance health through prevention research, education and clinical practice. Nurses in general, and the School of Nursing at the University of Minnesota in particular, are perfectly poised in this new era of “accountable care,” which values and rewards health organizations and professionals who bring a systems perspective and a broad community lens to population health.

Opportunities in public health nursing in Minnesota and around the world will continue to increase. U.S. News and World Report ranks our Doctor of Nursing Practice program specialty in public health sixth in the nation. PhD candidates are exploring new frontiers in population health with renowned faculty and in interprofessional teams.

On Jan. 1, 2015, advanced practice nurses in Minnesota gained new autonomy – now in state statute – to practice to the full extent of their education and licensure. Combining and aligning nursing’s authority with expertise in holistic, integrative health, informatics and innovation gives us a platform from which to lead.

The ultimate goal is health, rather than health care. It’s the moment for which we have been preparing.

Connie White Delaney
Professor and Dean
Study Explores Expanded Role for School Nurses in Obesity Prevention

Data Indicates 1 in 3 School-Aged Children is Overweight, Obese

by Barb Schlaefer

Most adults possess at least one memory of visiting the school nurse’s office: a playground collision, a first asthma attack or a queasy recline on a cot until a parent arrived.

Over time, the role of the school nurse has expanded well beyond the office-bound first aid station many recall. A new study underway by the School of Nursing evaluates the potential of expanding the role even further to engage school nurses in leading interventions to curb childhood obesity. Childhood obesity is a growing problem, with national data indicating one in three school-aged children is overweight or obese.

“Our study is the first to test in a randomized controlled trial a school nurse-led weight management program for young school-aged children who are at risk of being overweight or are overweight,” said Martha Kubik, PhD, RN, associate professor at the School of Nursing and the study’s principal investigator. Funded with a $3 million grant from the National Institute of Nursing Research, the study will involve 160 students and parents over a three-year period.

The Burnsville-Eagan-Savage School District has partnered with Kubik and the School of Nursing to conduct the research. Elementary school students, along with a parent, are participating in a nine-month program called SNAPSHOT (Students, Nurses and Parents Seeking Healthy Options Together). “It makes sense to build on the trusted relationships families already have with their schools,” said Erin Maughan, PhD, RN, director of research at the National Association of School Nurses. “Our best hope for addressing the obesity epidemic is to reach children and young families very early as habits are developing and give them the tools, information and resources to change behaviors.”

Students in grades three, four and five attend an after-school program, and parents meet in groups with other parents and a nurse, who also makes home visits. Research team member Alex Pokorny, RN, said she is struck by how genuinely committed parents are to improving their child’s health. “They may not always have strategies to address the problems they see,” she said. “That’s a piece we can provide. Limiting screen time for their kids is a huge and universal challenge for parents. Sometimes just validating that it’s hard and sharing ideas can inspire parents to set goals with their kids around this and other issues.”

Before joining the research team, Rebecca Hesse, RN, worked as a public school nurse for four years. She said school nurses are increasingly taking on a pro-active public health role in schools.

“As a school nurse, I was most effective when I was collaborating with the social worker, teachers, special education staff, nutritionists or counselors to improve the healthy culture of the school,” she said. “So the obesity prevention program we are testing is a logical next step.”

Students meet after school

Students meet in small groups one to two times a month to play, assemble a healthy snack and review a cartoon curriculum that includes characters like “Nurse Caren Aboutkids,” “Trudy Foodie” and “the Phyz.” With the first cohort partially through the program, the research team has observed a supportive community forming among the students who gather from different grades and schools from across the district.

(continued on page 4)
"It’s really interesting to hear the kids problem solve and help each other as they get to know one other," said Mary Zahurones, research assistant and BSN student. "When one student recently brought up his love for Mountain Dew, his peers had practical advice and honest ideas for why and how he could cut back."

While the goal of the study is to reduce excess weight gain among children, the curriculum is not focused on weight. Students learn healthy food and activity choices that will contribute to a healthy lifestyle.

Outcomes

Kubik attributes implementation success to the school district’s high level of commitment and the research team’s care and sensitivity to creating a safe, supportive environment for the children and parents.

The program builds on a commitment made by the school district years ago to conduct annual height, weight and body mass index screening of elementary school students. Kubik led the research team that developed and evaluated the screening program. Screening results are shared with parents, along with guidance on healthy eating and physical activity.

“We recognize the importance of helping families understand the value of a healthy BMI and to have the tools and strategies that can prevent diabetes, high blood pressure and other chronic conditions long term,” said Dawn Willson, director of health services for the school district. “Our district staff and leadership also recognize that optimal health leads to optimal learning.”

If the SNAPSHOT program is determined to be effective, the program model holds great promise for broader implementation. “The return on investment in terms of both short and long term health care costs could be substantial,” said Kubik.
All Fiber Is Not Created Equal
Psyllium Fiber Found to be Significantly More Effective

by Barb Schlaefer

A groundbreaking study to assess the efficacy of different fiber supplements in managing fecal incontinence found psyllium fiber to be the one significantly more effective than a placebo in reducing the frequency of incontinence.

The article describing the study, “Dietary Fiber Supplementation for Fecal Incontinence,” by Professor Donna Bliss, PhD, RN, FAAN, FGSA, and co-authors was named Article of the Year for 2014 by the journal Research in Nursing & Health. “There is still no cure for fecal incontinence,” said Bliss. “Our goal was to identify more effective tools for symptom management that could improve quality of life for people whose daily lives are hindered by this condition.”

Dietary fiber, often utilized as a laxative, is also recommended to manage fecal incontinence. However little is known about how different fiber types perform in managing the problem, which affects more than 40 percent of adults living in long-term care facilities and one in 10 adults in the community.

The three fiber supplements Bliss chose for this clinical trial are commonly used and all are considered soluble. In terms of the level of fermentation by bacteria in the colon, gum arabic is the most soluble, psyllium is moderately soluble and carboxymethylcellulose is the least soluble and most resistant to fermentation in the colon.

The randomized controlled trial involved 189 participants in four groups. Each completed a diet record, submitted stool samples and consumed the designated fiber supplement in the form of muffins or juice daily.

(continued on page 6)

<table>
<thead>
<tr>
<th>Fiber Supplement Taken</th>
<th>Baseline Period</th>
<th>Supplement-Taking Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carboxymethylcellulose (CMC)</td>
<td>4.7</td>
<td>6.2</td>
</tr>
<tr>
<td>Gum Arabic</td>
<td>5.3</td>
<td>4.3</td>
</tr>
<tr>
<td>Psyllium</td>
<td>5.0</td>
<td>2.5</td>
</tr>
<tr>
<td>Placebo</td>
<td>6.2</td>
<td>5.5</td>
</tr>
</tbody>
</table>

Estimated Weekly Fecal Incontinence Episodes reported
The research suggests that the degree to which dietary fiber might lessen accidental bowel leakage relates to the extent to which each dietary fiber dissolves in water and withstands fermentation (or does not degrade in the colon).

“If, as the study indicates, psyllium supplements can reduce by half the number of embarrassing episodes of accidental bowel leakage for people, we have advanced the science and added a new tool to the symptom management tool box,” said Bliss. “Psyllium holds promise as a conservative, natural and effective approach.”

The research was funded with $2 million from the National Institute of Nursing Research at the National Institutes of Health. The interprofessional team on the study included colon and rectal surgeon Ann Lowry, MD, from the University of Minnesota Medical School and the Colon and Rectal Surgery Associates; plant geneticist Hans-Joachim G Jung, PhD, USDA Agricultural Research Service and University of Minnesota Department of Agronomy and Plant Genetics; Robin Whitebird, PhD, MSW, HealthPartners Institute for Education and Research, and Kay Savik, formerly with the School of Nursing’s Office of Nursing Research. Numerous graduate and undergraduate students were involved in the research project, and the work was the subject of several student projects and publications.

“The strength of this research is in the meticulous attention to methodological and measurement rigor,” said Margaret Kearney, PhD, RN, FAAN, editor for Research in Nursing & Health. “Donna has focused on a problem that severely impairs quality of life but has received little research attention in nursing.”

While Kearney was not part of the editorial board that selected this paper from the more than 60 papers published in Research in Nursing & Health in 2014, she said the criteria used in the evaluation and selection process were each paper’s innovation and potential impact on science, clinical practice and quality of life.

"Psyllium holds promise as a conservative, natural and effective approach [to fecal incontinence]."
Professor Donna Bliss

What is psyllium?

All fiber is plant based, however each type of fiber is derived from a different plant source. Psyllium comes from the shrub-like Plantago Ovata plant, which grows naturally in India, Pakistan and parts of Eastern Europe. The plant produces thousands of tiny seeds covered with a fiber-rich husk. These husks are the source of psyllium.
Venture Capital for Research

Clinical Translational Science Institute at the University of Minnesota Supports Nurse Scientists

by Barb Schlaefer

Fewer than 5 percent of research ideas survive the painstaking journey from the seed of a new research theory to the reaping of proven health benefits for patients, which is typically a 10 to 15-year process. The Clinical Translational Science Institute at the University of Minnesota supports nurse scientists at every stage in the research process in a strategic effort to accelerate the translation of findings into meaningful clinical practices and programs that can improve and save lives.

“The CTSI is an excellent resource for career development awards, especially for our new investigators,” said Professor Ann Garwick, PhD, RN, LMFT, LP, FAAN, senior executive associate dean for nursing research at the School of Nursing. “Early support to allow for testing and vetting of ideas on a small scale is a crucial step in the discovery process.”

Funded by the National Institutes of Health, the CTSI is part of a national Clinical and Translational Science Award consortium working to accelerate and support research so that it can inform practice and improve outcomes. Through pilot research grants, faculty training and support services, the CTSI provides researchers with guidance on how to develop their discovery, how to make connections with interprofessional colleagues and how to lift promising early-stage projects off the ground. Since 2011, 29 School of Nursing faculty and students have received CTSI grant funds of $811,000.

Three CTSI funded projects at the School of Nursing seek to answer these questions:

1) Could the use of wearable health monitoring technology improve recovery for patients following a cardiovascular event?

Adhering to a prescribed regimen of physical activity following bypass surgery, angioplasty or other revascularization procedure is known to reduce mortality and enhance patient recovery. But participation rates are extremely low, frequently due to distance and transportation issues. A study underway at the School of Nursing aims to test the feasibility of a home-based cardiac rehabilitation program combined with wearable health monitoring devices to measure physical activity levels as well as sleep quality and quantity following a cardiac event. The study will lay the foundation for further work validating a home-based cardiac rehabilitation program as a viable alternative that can produce health outcomes as clinically meaningful as a more structured, but more costly hospital-based program.

Project Lead: Assistant Professor Erica Schorr, PhD, RN
Funding: Clinical Translational Science Institute Pre-K funding is $50,000 over two years

(continued on page 8)
2) What unique barriers do rural families encounter in preparing and eating healthy meals together?

Childhood obesity is a nationwide concern. Children living in rural areas are significantly more likely to be overweight or obese than children in metropolitan areas. This study engages parents from rural areas to inform the adaptation of successful obesity prevention programs being implemented in urban communities to maximize their effectiveness in Greater Minnesota. Surveys from 175 parents of elementary school-age children completed at the 2014 Minnesota State Fair are informing the design of a new intervention program. The long-term goal is to establish sustainable and effective family-focused interventions to prevent childhood obesity in rural Minnesota.

Project Lead: Associate Professor Jayne Fulkerson, PhD

Funding: $7,500 from the Clinical Translational Science Institute

3) Will a program combining both physical activities and motivational strategies increase participation of older adults in exercises known to reduce fall risk?

Leg-strengthening and balance activities reduce falls and related injuries. However, fewer than one in four people over the age of 65 practice these on a regular basis, and the rate of falls is increasing. One study underway at the School of Nursing is evaluating an intervention that includes instruction for fall-reducing physical activities and support for practicing these on a regular basis. The motivational part of the intervention includes a range of social supports as well as goal setting and problem solving support. Each of the 100 participants also uses a wearable monitoring device to track and report participation. The primary aim of this study is to evaluate the impact of specific motivational strategies on sustained participation in activities known to reduce fall risk.

Project Lead: Assistant Professor Siobhan McMahon, PhD, MPH, RN, GNP

Funding: $75,000 over three years plus salary supplement from the Clinical Translational Science Institute
Signs of an Epidemic
School of Nursing Students, Alumni and Faculty Lead Population Health Efforts

by Brett Stursa

When Time magazine named the Ebola fighters the 2014 Person of the Year, the editors said it was the courage of health care workers and what they risked to provide care that earned them the accolades. “For tireless acts of courage and mercy, for buying the world time to boost its defenses, for risking, for persisting, for sacrificing and saving, the Ebola fighters are Time’s 2014 Person of the Year,” they wrote.

Those Ebola fighters were on the front lines of what the Centers for Disease Control and Prevention reports was the largest Ebola outbreak in history and the first Ebola epidemic the world has known. Nearly 24,000 people were diagnosed with Ebola and more than 9,000 of them died from it, including 500 health care workers.

Yet, the predictions during the epidemic were so much worse. Back in September, the CDC estimated that without additional intervention there would be 1.4 million Ebola cases in Liberia and Sierra Leone by January. But, by the end of January, there were not even 20,000 cases of Ebola in those countries. The turnaround is striking and would not have occurred if not for the efforts of health care workers who fought against the virus.

We’re proud of the work University of Minnesota School of Nursing students, alumni and faculty contributed to this international effort. Bachelor of Science in Nursing students enrolled in a public health course, including Noah Dietsche, mapped the village of Fish Town, a rural community in Liberia, and the surrounding area for health care workers and faculty headed there. A 2009 Bachelor of Science in Nursing graduate, Sara Tomczyk, worked with the CDC to provide contact tracing in Guinea. Associate Professor Cheryl Robertson, PhD, MPH, RN, FAAN, and Clinical Assistant Professor Dorcas Kunkel, DNP, RN, were invited by the American Refugee Committee to be part of a team charged with training and setting protocols for a new 50-bed Ebola Treatment Unit in Liberia.

What follows are their insights and observations, written in their own words, about what it was like to participate in this historic, international effort.

(continued on page 10)
We would travel to villages in teams and my role was to help assess contact tracing – the process of finding everyone who has come in direct contact with an ill Ebola patient and watching them for signs of illness for 21 days from the last day they came in contact with the Ebola patient. When I started there was a small team of contact tracers for almost 800 contacts. I helped to organize training on Ebola contact tracing so that we could increase the size of the team.

Relationship building in the communities where we worked was essential, but it wasn’t always easy. We educated families about important infection control procedures like hand hygiene and made quick referrals to treatment centers for those who were ill.

Some villages closed their borders to Ebola outreach efforts. Misconceptions about the disease would propagate in those villages – that it was caused by a curse or that a certain number of people had to die before the mysterious illness would stop. Many of the Ebola education messages are difficult to accept because they are in conflict with the culture and traditions within these communities.
As part of my public health clinical as a pre-licensure nursing student at the School of Nursing, I helped map the village of Fish Town in Liberia. The community, in the southern part of the country, has a population of about 5,000. The faculty from the School of Nursing going to Fish Town asked that we map the area to identify transportation routes. We used the online mapping program OpenStreetMap to get geospatial data from a satellite to create a data map that can be utilized by health care workers for epidemiological and transportation purposes.

Working on the map was an amazing experience. Having a small impact on this global problem without leaving the country gave me a sense of being a part of something bigger and taught me I can positively impact people I have never met. The idea that we can and should help out with global problems is very powerful and something I will take with me for the rest of my life. We are all interconnected; when others suffer in a distant place we should not turn our backs until the problem spreads to us. We should be proactive, work collaboratively and resolve the situation in its place of origin.

(continued on page 12)
**Cheryl Robertson, Associate Professor**
- Teaches classes in war and health, refugee experience and public health in resource-poor countries
- Research includes refugee trauma, community-based coping intervention research and eco-health strategies in Central/Eastern Africa
- Former director of international programs at the Center for Victims of Torture

**In Cheryl’s Words**
After arriving in Monrovia, I started training in a class conducted by the U.S. military — young service men and women who are mostly nurses — and they were good at what they do. We learned from a panel of Ebola survivors. Their stories were intense, and they acted as authentic mock patients for us. We also did group decision-making scenarios for patient admission to the Ebola Treatment Unit. As a nurse it felt counter-intuitive to be only looking to identify one disease. A patient can be terribly ill or injured, but we would send them away if we did not think they had Ebola.

Monrovia looked like a classic African city that is a bit worse for the wear. The hints of the epidemic were in the makeshift handwashing stations in many public places and the myriad of murals and posters exhorting us: “Don’t touch dead people,” “Ebola is real” and “Liberia can beat Ebola!”

As we trained in Monrovia, we waited for staff housing to be finished in Fish Town. With so many organizations and players involved, disorganization was expected. Despite the confusion, our involvement sure beat the alternative of standing by and watching.

During the training in an actual ETU, I put on scrubs made of un-breathable and stiff material. I then went to the personal protective equipment donning stations, where I got a Tyvek suit, apron, gloves, boots, mask, goggles and a hood. Once dressed, someone wrote your name, role and time in on your suit so we could identify one another as we lumber into our respective units.

There were three wards in each ETU: suspected cases, probable cases and confirmed cases. We could walk from suspected to probable to confirmed, but not the other direction. We entered the hot zone through a rickety door and it felt a bit surreal, but it was just another place.

The thing that I feared the most — the heat inside the personal protective equipment — was actually no big deal. Obviously it was unpleasant, but I was focused and methodical, moved slowly and purposefully. Instead, I worried about other things, like suddenly wondering if I could have Ebola on my socks. Fortunately that passed.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A 2-year-old dies from a mysterious illness now thought to be Ebola.</td>
<td>The WHO reports an Ebola outbreak in Guinea with 49 patients and 29 deaths. Ministry of Health of Liberia confirms its first case.</td>
<td>CDC and others report that Ebola outbreak numbers are dwindling.</td>
<td>First Ebola case reported in Sierra Leone.</td>
<td>Doctors Without Borders reports the epidemic is out of control, with 528 cases and 337 deaths globally.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Loud rock 'n' roll blasted all day and all night through a speaker from a radio in the ETU that was not quite tuned to the right place on the dial. There were no books, televisions, activities, toys or distractions. There was also no expectation for entertainment by anyone.

The ETUs served one purpose: to squelch the epidemic. Upon admission to the ETU, every person received five days of antibiotics and malaria meds. Most patients just lay on plastic cot mattresses, with no sheets or blankets for most.

Small kids were alone, just lying on beds. Many of their parents died and they just waited. Some patients sat up and talked while others were barely conscious. Patients were seen and assessed three times per 24 hours. Paracetamol (Tylenol) was the only pain med. There was a very limited essential drug kit to mitigate the most common symptoms of fever, vomiting and diarrhea. Valium and thorazine were available for combative behavior and hiccups.

During my first day training in the ETU, I found a thermometer among some pens that read 37.3°C for every one of my patients, no matter how hot they felt. These temperatures were recorded. The priorities were very clear: staff safety, stop the epidemic and patient care. Two nurses from our ETU died of Ebola while I was there. It took my breath away.

(continued on page 14)
My last week in Liberia was spent doing the kind of work that I know and feel comfortable doing as a public health nurse. Two colleagues and I hopped on a little four-seater plane amidst buckets for bleach water and flew to Fish Town. Our purpose in Fish Town was to do a preliminary assessment of the 19 health facilities in the River Gee County region. We hoped to build relationships with the health care providers, local ministry personnel, community leaders, women’s groups and non-governmental organizations. All health centers and clinics closed down at some point during the Ebola epidemic, but all were back open in some form.

We visited five of 19 health centers in the county, as well the county health team. When we visited the most remote clinic – a 3.5 hour hike west of Fish Town – the Joproken village chief greeted us. Before we knew it, the three of us were hosting a community meeting – complete with dancing and singing. It was certainly not planned but it was a great opportunity to answer questions and learn about community concerns.

When I returned to Minneapolis, I initially felt uncomfortable with my 21-day quarantine as I felt like I couldn’t do the things I typically do to help me shift back into Minnesota. But it gave me time to reflect. An Ebola epidemic is all about poverty and broken infrastructure. The global response was messy, slow, uncoordinated, colonial and wasteful. It was also effective. The epidemic turned around, but we can’t forget that the post Ebola community healing will be an immense challenge.
Building on Strengths

Leslie Morrison Named Finalist for New Investigator Award

by Brett Stursa

Women between the ages of 18-24 have the highest unintended pregnancy rate of all age groups, with more than 60 percent of pregnancies unplanned, yet few studies have looked at positive factors that promote consistent contraception use for women in that age range. This dearth of research was the impetus for Leslie Morrison to explore the topic as she began work on her dissertation.

“When you look at unintended pregnancies, it really is a women’s health and a public health issue,” said Morrison, who has a nursing background in midwifery and public health. “I really thought this emerging adult age group was an interesting age group to look at and had a lot of health needs that still need to be addressed.”

Her research, conducted while a PhD candidate, recently garnered recognition from the Society for Adolescent Health and Medicine, which named her one of five researchers nationally as a finalist for its New Investigator Award. Morrison was nominated for the award by Associate Professor Renee Sieving, PhD, RN, FAAN, FSAHM. “Dr. Morrison’s research addresses the important public health issue of unintended pregnancy among emerging adults,” said Sieving. “Her research and scholarship will make substantive contributions to education, practice and policy related to reproductive health during adolescence and early adulthood.”

Morrison knew she wanted to focus her research on the positive factors that promote effective use of contraception. “I was interested in how we can build on strengths so that women use contraception effectively,” said Morrison. “It was important to understand that this age group has some pretty unique characteristics. Their ability to plan for the future made me think that there was some value in looking at strengths.”

She conducted a secondary data analysis using data from the National Longitudinal Study of Adolescent Health to evaluate relationships between protective factors, risk indicators and consistent contraceptive use. The study sample included 842 18-25-year-old women attending four-year colleges. The protective factors she examined included self-esteem, self-confidence, independence and life satisfaction. “We saw that all of the protective factors were positively associated with effective contraception use, with life satisfaction having the strongest relationship,” said Morrison. Risk indicators she examined included heavy drinking, marijuana use and depressive symptoms. “We saw that marijuana and depressive symptoms negatively influenced contraception use,” said Morrison. She also examined whether protective factors impacted the effects of risk indicators on consistent contraceptive use. The findings suggest they act independently.

“The study represents an important early step towards understanding relationships between protective factors and consistent contraceptive use among emerging adult female college students,” said Sieving, who was Morrison’s PhD program advisor.

(continued on page 16)
Morrison graduated with her PhD degree in 2013 and is now a professor at Metropolitan State University in St. Paul, teaching courses in public health, primary care and women’s health. “In the perfect world I would work as midwife, and I would use that experience to help me develop more research questions and I would be teaching,” said Morrison. “Hopefully someday I will get to do that.”

In the meantime, she continues to work on her manuscript and has presented her findings at regional poster presentations as well as a national conference in Bethesda, Maryland.

She will also present her findings at the Society for Adolescent Health and Medicine’s annual meeting, where the recipient of the New Investigator Award will be named. The award was established to recognize professionals who, through excellence in research, have furthered the society’s goals to promote the development, synthesis and dissemination of scientific and scholarly knowledge unique to the development and health care needs of adolescents.

“I feel very fortunate and honored,” said Morrison. “I know I would not be there without the great committee I had, who are now my co-authors.” They include Sieving, Research Associate Sandra Pettingell, PhD; Professor Linda Bearinger, PhD, RN, FAAN, FSAHM; School of Public Health Associate Professor Wendy Hellerstedt, PhD, MPH, and Associate Professor Barbara McMorris, PhD.

then it’s time to ask yourself to consider the PhD in Nursing program at the University of Minnesota. The program prepares students for leading roles in research, academia, corporations and health systems. Our graduates discover innovative ways to improve clinical practice and health locally and globally.

Ranked 15th in NIH funding among schools of nursing nationally, the University of Minnesota School of Nursing is leading important discoveries in prevention science, health promotion, symptom management, nursing informatics and systems innovation.

Learn more about the PhD in Nursing nursing.umn.edu
Supporting Weight Loss
PhD Candidate Julie Sabo Studies Social Support Methods that Help Nurses Lose Weight

by Brett Stursa

The work of nursing often involves irregular meal schedules, long work hours and high levels of stress. This may help explain why the majority of nurses are overweight. PhD candidate Julie Sabo is hoping to shed light on what type of support helps nurses in their weight loss efforts.

While research has shown a key component to weight loss is social support, there is less known about whether social support is more effective face-to-face or online. “In my review of literature, I found there is little in the literature regarding whether the social support needs to be in person or by other methods,” said Sabo. “There is a growing body of evidence that shows that other methods of social support, such as web-based or telephone, may offer the same advantages as face-to-face social support.”

Sabo is conducting a pilot study that aims to compare the effects of web-based support versus face-to-face social support on weight loss outcomes. The primary goal is to determine the feasibility of the web-based intervention for weight loss. “Julie’s exploration of virtual social support to enhance the efficacy of a weight loss program could be particularly beneficial to registered nurses, many of whom have irregular work schedules and might have difficulty consistently attending face-to-face classes,” said Associate Professor Diane Treat-Jacobson, PhD, RN, FAAN.

The Minnesota Nurses Association Foundation recently awarded Sabo a $10,000 Katharine Densford Dreves Research Grant to fund the research. For her research, nurses with a body mass index higher than 25 recruited from the University of Minnesota Medical Center will participate in a 12-week weight loss program.

Thirty nurses will be separated into two groups. Both groups will be given information about the DASH diet plan, which emphasizes eating fruits, vegetables, low-fat dairy foods, fish, low-saturated fat protein and whole grains. Calorie reduction, keeping a nutrition diary and physical activity goals will be reviewed for both groups as well. The face-to-face group will meet weekly to discuss nutritional and physical activity goals, while participants in the web-based social support group will meet virtually once a week, at the same time and day of week. Participants in the web-based group will meet as a group once a month in-person for outcome measurements and to review the use of web-based program components and the nutrition diary.

Sabo hopes to finish conducting the research in the summer and have her dissertation completed in the fall.

"There is a growing body of evidence that shows that other methods of social support, such as web-based or telephone, may offer the same advantages as face-to-face social support."

PhD Candidate Julie Sabo
New Laws Empower Advanced Practice Nurses

The Katharine J. Densford International Center for Nursing Leadership-sponsored forum “New Nursing Practice Laws: What, So What, Now What?” was held on Dec. 11, 2014. This community forum was designed to explore the impact and consequences of the recent changes in Minnesota law that empower advanced practice nurses to support the health of Minnesota citizens. In collaboration with several other statewide nursing organizations, the forum enabled participants to recognize the power of nursing’s political influence and learn how the new legislation translates into policies, rules, regulations and opportunities.

Throughout the five presentations and three afternoon work groups participants learned about the role of political influence and action. They also discussed how new laws influence policy and practice. Clinical Associate Professor Mary Chesney, PhD, RN, CNP, provided the keynote address and shared lessons learned from the political process that resulted in passage of the legislation. Advanced Practice Nursing Specialist Julie Sabo, MN, RN, ACNS, from the Minnesota Board of Nursing discussed the implementation of the new practice laws and licensure requirements. Monica Feider discussed some of the concurrent issues about the State’s Health Professions Services Program. Regulatory and Policy Nursing Specialist Mathew Keller, JD, RN, from the Minnesota Nurses Association raised issues about potential unintended consequences that may emerge from the rules and regulations that have been developed.

In the afternoon participants self-selected work groups to develop personal and professional activation plans in regard to issues raised and what personal action to take. The day concluded with Clinical Assistant Professor Eileen Weber, DNP, JD, RN, PHN, fielding questions from the audience addressed to the panel of experts. Presentations were recorded and are available for future reference at http://z.umn.edu/nursing-practicelaws. Empowering nurses to practice to the full scope of their license and education better serves the health of communities throughout the state.
As we get older it can be difficult to tell the difference between symptoms of a specific disease and symptoms we generally associate with aging. This is especially true with cardiac-related conditions that lead to heart failure.

Minnesota Hartford PhD Nurse Scholar, Marjorie Webb, DNP, RN, is conducting research to give patients tools to help change this. “Older patients with heart failure often think they are short of breath or fatigued because they are old. They don’t attribute these symptoms to a condition known as volume overload,” said Webb. “By the time patients notify their providers of symptoms, it is often too late to manage these symptoms at home so they are hospitalized. And as we know, hospitalization can be very hard on older patients.”

A first step toward developing a tool that accurately measures signs of volume overload is to look beyond daily weight measurements, a practice that patients find difficult. Instead, Webb is experimenting with breath capacity as an indicator, in the hopes of eventually developing a hand-held device that is easy to use.

The importance of this area of research has already been recognized by the American Nurses Foundation, which awarded Webb a $30,000 Midwest Nursing Research Society Virginia Stone Grant for 2014-2015. In addition, Webb received a highly competitive University of Minnesota Dissertation Fellowship.

Webb attributes the successful launch of her research program to the excellent mentoring and financial resources at the School of Nursing. “My advisor, Associate Professor Diane Treat-Jacobson, PhD, RN, FAAN, has encouraged and cajoled me to be able to do research at a level that I was unsure I could achieve,” said Webb. She is also thankful for the mentoring by Professor Ruth Lindquist, PhD, RN, ACNS, FAHA, FAAN; Assistant Professor Ulf Bronas, PhD; and Medical School Assistant Professor Lisa Anderson, PhD.

She identifies her change in outlook about older people to the preparation she received as a Minnesota Hartford Nursing Education Scholar. “Instead of seeing patients with heart failure who just happened to be older, I saw older patients who just happened to have heart failure. The trajectory of care started at a different place,” said Webb. “I really care about overall quality of life for older patients with heart failure, and I want them to be able to do the activities they want to do and stay in their own homes as long as they can or want to.”
Two Federal Offices Name Sieving's Research, 'Prime Time,' an Official Evidence-based Intervention

Two federal offices placed Associate Professor Renee Sieving’s clinic-based prevention program, developed over the past decade, on a short list of evidence-based interventions that meet specific criteria for quality and rigor. Sieving, PhD, RN, FSAHM, FAAN, and her team designed a multi-faceted intervention to reach teen girls in clinic settings instead of school settings. The goal? Reducing early pregnancies and sexually transmitted diseases among teen girls and keeping them connected with school.

Called "Prime Time," this approach can be best described as a youth development intervention emphasizing the strengths that protect young people while educating and empowering them with social and emotional skills for healthy living. The 18-month intervention involves one-on-one case management focused on building strong relationships with family and friends and peer-educator training that builds knowledge and skills needed for healthy behaviors and prepares teens to reach and teach others as peer educators while in "Prime Time."

Sieving’s interdisciplinary research team has gathered the evidence showing the impact of "Prime Time." Results have consistently shown success for teens in this program. Peer-reviewed articles in professional journals helped to tip the scales at the Centers for Disease Control and Prevention and the Office of Adolescent Health as they independently selected "Prime Time" as an effective approach for improving teens' sexual health.

Fidelity to the methodology is of utmost importance – it is requisite for comparing results from a variety of clinics in various locations around the country.

Federal and state funders, as well as policy makers and providers, give extra attention to interventions on the CDC and OAH list of effective interventions. So, in the near future, Sieving’s group can expect to be consulting and providing technical assistance to newly-formed research teams.

In short, "Prime Time" is ready for prime time!

If you’re interested in reading more about "Prime Time," check out these articles:


Demonstrating the Value of Standardized Nursing Data

Every health care setting in Minnesota should integrate a standardized nursing terminology that is recognized by the American Nurses Association into their electronic health records. This recommendation of the Minnesota e-Health Advisory Committee and signed by Commissioner of Health Edward Ehlinger, MD, urged all health systems to recognize the value of nursing and nursing data. However, implementation of nursing terminologies in EHRs is still in its infancy. The Center for Nursing Informatics is sponsoring two events to advance this policy through demonstrating the value of standardized nursing data.

**TWO CONFERENCES: ONE GOAL**
The "Second International Conference on Research Methods for Standardized Terminologies" will bring together experts in data mining and program evaluation strategies for an intensive interactive one-day event. National experts will present cutting-edge methods and provide hands-on experiences using these methods. Participants will create evaluation strategies for programs and projects. Researchers, faculty, students and practitioners will share new strategies that are needed for big data analytics to impact health systems and quality of care. The conference will be April 15 in West St. Paul, Minnesota. To register or learn more, go to http://tinyurl.com/umn.ni-research.

"Nursing Knowledge: 2015 Big Data Science Conference" will advance an action plan to create sharable, comparable nursing data that is integrated into the electronic health record. Participants in this third-annual conference learn about and get involved with national initiatives, including streamlining documentation and integration of evidence-based practice in EHRs, integration of standardized nursing data in EHRs, health policy initiatives, and cutting edge research methods to transform health and health care.

A pre-conference workshop will demonstrate the value of implementing a national action plan for sharable and comparable nursing data. Exemplars for nurse leaders, informaticians, academics and researchers will demonstrate the value when standardized nursing and other health data are integrated into EHRs and subsequently reused for improving practice. "Nursing Knowledge: 2015 Big Data Science Conference" will be June 4-5, with the pre-conference June 3 in Minneapolis. To learn more and register, go to http://z.umn.edu/bigdata.
Investigating Forensic Nursing: Beyond the CSI Effect

Bodily fluids. Bruises. Teeth. Fingerprints. Forensic health care professionals routinely observe, collect and document these sometimes unsavory specimens to help piece together a crime. It is not typically the glitzy, glamorous or camera-ready job as portrayed on popular television shows, but it is a critically important job that provides health care at the intersection of crime and health.

Forensic nursing is gaining momentum nationally and globally as one of the newest specialty areas recognized by the American Nurses Association and has an accreditation process, Sexual Assault Nurse Examiner-Adult/Adolescent/Pediatric. To introduce nursing students to this growing field of specialty care, Associate Professor Carolyn Garcia, PhD, MPH, RN, SANE-A, developed a forensic nursing course at the University of Minnesota, which was first offered in the fall of 2014. “Examining the Evidence: Forensic Health Care Practices and Opportunities” is designed for graduate students and undergraduate seniors who are interested in exploring forensic health care roles. Garcia is a certified Adult/Adolescent Sexual Assault Nurse Examiner and has practiced as a SANE since 1996.

The responsibilities of a forensic nurse involve caring for both victims and perpetrators of crime, collection of specimens to be used by legal and police collaborators, and documentation to maintain a chain of custody that minimizes potential for specimen contamination. Forensic nurses work in a variety of settings, such as emergency departments, medical examiner’s offices, law offices, prisons and mental health institutions. Subspecialties within forensic nursing include sexual assault nursing, death investigation, forensic psychiatric nursing and medical-legal consulting. These forensic nurse specialists are also sometimes called to testify in court when a criminal case goes to trial.

Forensic nurses are often the first professionals a victim will speak to after an incident. The ability of the forensic nurse to listen and establish rapport in a short window of time can strongly influence the extent to which a victim of sexual violence is able to share details about what happened.

The forensic nurse will document what is shared, assess and photograph injuries, assess for risk of pregnancy or sexually transmitted infections, review the pros and cons of making a report with the police if this has not already been done, and collect and securely package specimens that could be analyzed for DNA. Critically important in this process is assessment of safety and working with an advocate to ensure the victim has a safe place to go following discharge from the emergency department. Finally, the forensic nurse will provide education and information regarding follow-up care and counseling.
Balancing Health Care with Need for 'Time to Be a Boy'

by Associate Professor Wendy Looman, PhD, RN, CNP

As nurse researchers, teachers and practitioners, we aim to have a lasting impact on patients and families. Often, we are touched by the people we encounter in the nursing role in unexpected ways, and it is the patients and families who impact our lives.

Levi Rickert and his family were part of the TeleFamilies study, a clinical trial funded by a grant from the National Institute of Nursing Research conducted by faculty at the School of Nursing with the University of Minnesota Medical School Professor Stanley Finkelstein, PhD, serving as the principal investigator. Born with a condition called holoprosencephaly, Levi was unable to crawl, speak or eat on his own. “Levi has so many complex medical issues, from his eyes literally to his toes,” said his mother Ashlee Rickert.

The Rickert family was one of 163 families with children who have complex medical conditions to participate in the TeleFamilies study, which was designed to test the effects of telehealth care coordination by an advanced practice nurse. Care coordination helps families navigate the health care system, specialty providers, and a maze of community and school-based services. Completed in 2014, study findings suggest that telehealth care coordination by an APRN improves the overall experience of health care for families.

But the study effects go beyond measurable outcomes, according to Mary Erickson, DNP, RN, PNP. A graduate of the school’s Doctor of Nursing Practice program, Erickson is an experienced pediatric nurse practitioner who served as the study APRN. Because Levi’s needs were complex, unpredictable and often required close monitoring, Erickson had frequent interactions with Levi’s mother Ashlee. The effects of the interactions were significant — on Erickson. “Levi taught me to see beyond his limitations to his capabilities,” said Erickson. “Regardless of the complexity, the family sees the boy inside. As providers, we need to slow down and find that boy when we are delivering care.” As Ashlee and her family weighed the risks and benefits of medical interventions, their decisions were guided by faith and a commitment to Levi’s comfort and safety. “I think for me, quality of life is just remembering that he’s a boy. Above all and foremost, I wanted to make sure that he is enjoying life,” said Ashlee.

While Levi’s care required frequent medical interventions and hospitalizations, Ashlee’s goal was to balance his health care with his need to be happy at home with his family. Coordinated care and a consistent connection to a nurse who knew Levi and his family enabled him to spend more time at home with his family and gave him more “time to be a boy.”

Ashlee Rickert with her son Levi, born with holoprosencephaly.
Center for Gerontological Nursing

STRIDE Strives to Prevent Fall-Related Injuries

It’s the news that many relatives and loved ones of older adults dread to receive: your otherwise self-sufficient mother, father, grandmother or grandfather has fallen and suffered injuries that threaten to rob them of their independence. Falls are the top cause of injury among adults age 65 and over. Falls can cause injuries, such as hip fractures and head trauma, lead to disability and increase the risk of early death.

These sobering facts led the Patient-Centered Outcomes Research Institute and the National Institute on Aging to form the Fall Injuries Prevention Partnership. This partnership, funded by a $30 million grant, is currently sponsoring the five-year clinical trial STRIDE (Strategies to Reduce Injuries and Develop Confidence in Elders), which will test individually-tailored interventions to prevent fall-related injuries in 80 primary care clinics in 10 health care systems across the United States. STRIDE differs from other trials with an approach that integrates proven fall reduction strategies into an intervention that can be adopted by health care systems.

Registered nurses deliver the STRIDE intervention in primary care clinics and collaborate with clinic providers and other professionals in the community. Unique features of STRIDE are based on the core value of patient centeredness and the belief that individual preferences drive health-promoting behaviors. As a result, the intervention includes self-management concepts, referral to individually relevant community resources, follow-up and support.

Assistant Professor Siobhan McMahon, PhD, MPH, RN, GNP, is serving as the national course director for falls care managers and as the site co-principal investigator at Essentia Health, an integrated health system serving patients in Minnesota, Wisconsin, North Dakota and Idaho. In her course director role, McMahon collaborates with STRIDE team members, as well as experts in the design of education from the Institute for Johns Hopkins Nursing.

The first version of a course to develop RN competencies necessary to fulfill the role of falls care manager in primary care settings has been pilot-tested with 12 nurses. The group is currently incorporating its evaluation into the final course design.

With an interdisciplinary team that includes experts in fall prevention from many different fields, STRIDE will be a landmark fall prevention study that will make a real difference in improving the health and lives of older adults. “With such varied perspectives, producing what is needed for the study is logistically challenging, but the output is far better than what can be produced from a unidisciplinary perspective,” said McMahon. “I have learned so much about team science, group randomized trial methodology and interprofessional approaches to continuing education. I have also learned much about the operations of a large trial and have expanded my network of colleagues and mentors.”
Briefly

‘Interdisciplinary Journal of Partnership Studies’ launches

The inaugural issue of the “Interdisciplinary Journal of Partnership Studies” was published in the fall of 2014. Co-sponsored by The Center for Partnership Studies in California, the University of Minnesota School of Nursing and the University of Minnesota Libraries, the journal’s mission is to be the essential anthology for scholarly writing about cultural transformation and partnership. Clinical Associate Professor Teddie Potter, PhD, RN, is the executive editor. The journal can be read at https://sites.google.com/a/umn.edu/ijps/.

Visiting Scholar Arrives from China

Visiting scholar Yan Jiang, associate professor, vice director of the West China Hospital nursing department and associate dean of West China School of Nursing, SiChuan University, Sichuan P.R. China, arrived at the School of Nursing in September and will be with the school through August. Her focus is on nursing research management. Associate Professor Fang Yu, PhD, RN, GNP, is her sponsor.

Awards and Honors

Professor Jean Wyman, PhD, RN, GNP, FAAN, FGSA, was awarded the Nurse Leader in Aging Award by the American Academy of Nursing and the John A. Hartford Foundation. The award recognizes a leader in gerontological nursing for significant achievements, contributions and mentorship in the field of aging. Wyman also received the President’s Award from the national Society of Urological Nurses and Associates for her contributions to the organization.

Professor Kathleen Krichbaum, PhD, RN, FGSA, ANEF, FAAN, was appointed to the Commission on Collegiate Nursing Education’s Accreditation Review Committee, a national review group that recommends programs for accreditation.

Pioneer Network, a national organization that advocates for improvements in elder care, named Associate Dean for Academic Programs Christine Mueller, PhD, RN, FGSA, FAAN, president and board chair for 2015.

Professor Mary Jo Kreitzer, PhD, RN, FAAN, was named co-editor in chief of Global Advances in Health and Medicine, which was founded to catalyze whole person and whole systems care and healing.

Clinical Associate Professor Jeanne Pfeiffer, DNP, RN, was elected to the International Federation of Infection Control Board, representing the United States, Canada, Japan, Israel, New Zealand and Australia. The goal of IFIC is to minimize the risk of infection within health care settings worldwide through development of a network of infection control organizations for communication, consensus building, education and sharing expertise.

(continued on page 26)
Associate Professor **Bonnie Westra**, PhD, RN, FAAN, FACMI, was selected as a 2014 recipient of the Leadership Award by American Medical Informatics Association. Westra has co-chaired the Alliance for Nursing Informatics for the past six years.

Clinical Assistant Professor **Cheri Friedrich**, DNP, RN, CNP, is serving as president of the Minnesota affiliate of the National Association of Pediatric Nurse Practitioners. Her term runs through June 2015.

University of Minnesota President Eric Kaler appointed Professor **Linda Bearinger**, PhD, RN, FAAN, FSAHM, to a second term as a faculty legislative liaison. This role assures a conduit between the State Capitol and the University’s Faculty Senate, serving as a resource for members of the Legislature and connecting faculty expertise with issues before the House and Senate.

Clinical Assistant Professor **Dan Lovinaria**, DNP, RN, CRNA, was named president-elect of the Minnesota Association of Nurse Anesthetists. Lovinaria is serving as president-elect, while Clinical Associate Professor **Kathryn White**, DNP, RN, CRNA, serves as president.

Clinical Assistant Professor **Judy Pechacek**, DNP, RN, was awarded the Minnesota Organization of Leaders in Nursing’s Star Award for her work as the Policy and Advocacy Chair for the organization. She was also elected chair for another two-year term.

Associate Professor **Fang Yu**, PhD, RN, CNP, was appointed to the Metropolitan Area Agency on Aging’s Board of Directors for a two-year term.

---

**New Appointments**

**Eunice Areba**, PhD, RN, PHN, joined the school as a clinical assistant professor. Areba earned her PhD in nursing from the University of Minnesota. Her research involves fostering healthy youth development.

**Nancy Bertino** joined the School of Nursing as an executive administrative assistant in the Dean’s Office. Bertino earned a bachelor’s degree in natural sciences from the University of Alaska, Anchorage. For the past 18 years she was employed with the Anchorage School District, most recently as an executive secretary for the executive director of special education.

**Anne Chevalier McKechnie**, PhD, RN, IBCLC, joined the school as an assistant professor following her postdoctoral fellowship in interventions to prevent or manage chronic illness at the University of North Carolina at Chapel Hill. McKechnie received her PhD in nursing science with a minor in sociology from the University of Wisconsin-Madison. Her research involves understanding the needs of families who continue pregnancies after fetal diagnoses and are preparing to care for their children with chronic conditions.

**Abbi Iticha** joined the school as an accountant, working with non-sponsored and sponsored accounting, including payroll accounting. She has previous University of Minnesota accounting experience from her positions at Boynton Health, the School of Public Health and in the central office of Disbursement Services. Iticha earned a bachelor’s degree in business management and an AAS degree in accounting.
Calendar of Events

**Wednesday, April 15:** The International Conference on Research Methods for Standardized Terminologies will bring together experts in data mining, time motion studies and program evaluation strategies for an intensive one-day event that includes hands-on experiences and networking with international leaders in methods development for standardized terminology research.

**Thursday, April 23:** All are welcome to attend the Alumni Spring Celebration and Class Reunions. The Discovery Expo, silent auction and dinner program with American Nurses Association’s Martha Turner, PhD, speaking about moral courage will take place at the Town and Country Club in St. Paul. Contact Laurel Mallon at 612-624-2490 or mallo001@umn.edu for more information.

**Friday, April 24:** Join alumni, faculty, students and community partners for Nursing Research Day, with oral and poster presentations showcasing innovative research and evidence-based projects that address health issues and improve quality of care at. The keynote speaker is Pamela Hinds, RN, PhD, FAAN, associate center director for translational science at Children's Research Institute in Washington, D.C., and professor of pediatrics at George Washington University.

**Friday, May 15:** Spring commencement will be at 2 p.m. at Northrop.

**Friday, May 29:** The Midwest Gerontological Nursing Education Alliance Meeting will feature a variety of speakers as well as poster presentations on gerontological nursing education, sponsored by the Minnesota Hartford Center of Gerontological Nursing Excellence and the University of Minnesota School of Nursing.

**June 4-5:** Nursing Knowledge: 2015 Big Data Science Conference will advance an action plan to create sharable, comparable nursing data that is integrated into the electronic health record. Learn about and get involved with national initiatives, including streamlining documentation and integration of evidence-based practice EHRs, integration of standardized nursing data in EHRs and health policy initiatives. A pre-conference tutorial will be held June 3.

Visit www.nursing.umn.edu for additional information regarding these events.
EXTRAMURAL GRANT AWARDS

Faculty Principal Investigators
Calendar Year 2014

Avery, Melissa
Assuring Quality and Diversity in Advanced Practice Nursing
Health Resources and Services Administration/U.S. Department of Health & Human Services

Bearinger, Linda
MN Knowledge to Practice in Adolescent Health (MN-KPAH)
Health Resources and Services Administration/U.S. Department of Health & Human Services

Bearinger, Linda
Center for Adolescent Nursing (T80)
Health Resources and Services Administration/U.S. Department of Health & Human Services

Bliss, Donna
Disparities in Incontinence and Perineal Skin Damage in Nursing Home Elders (R01)
National Institute of Nursing Research/National Institutes of Health

Bronas, Ulf
Exercise as an Adjunct Therapy to Reduce Blood Pressure in Chronic Kidney Disease (K23)
National Institute of Diabetes and Digestive and Kidney Diseases/National Institutes of Health

Cheung, Corjena
Yoga Versus Aerobic and Strengthening Exercises for Managing Osteoarthritis
The University of Iowa/The John A. Hartford Foundation (Prime)

Chi, Chih-Lin
Predictive Optimal Anticotting Treatment for Segmented Patient Populations
Harvard University/National Institutes of Health (Prime)

Dean, Patrick
Healthcare Research Faculty Perceptions on Burnout
Mayo Clinic Rochester/National Institutes of Health (Prime)

Delaney, Connie
Greater Plains Collaborative Clinical Data Research Network
University of Kansas Medical Center/Patient-Centered Outcomes Research Institute (Prime)

Fulkerson, Jayne
Healthy Home Offerings via the Mealtime Environment (R01)
National Institute of Diabetes and Digestive and Kidney Diseases/National Institutes of Health

Fulkerson, Jayne
Childhood Obesity Prevention in Rural Minnesota Communities (COPRMC)
CTSI/National Institutes of Health

Garcia, Carolyn
Reducing Stigma, Promoting Resilience: Population Health Interventions for LGBTQ Youth
The University of British Columbia

Garwick, Ann
Center for Children with Special Health Care Needs (T80)
Health Resources and Services Administration/U.S. Department of Health & Human Services

Gaugler, Joseph
The Personal Health Record for Persons with Dementia and their Family Caregivers (R21)
National Institute of Nursing Research/National Institutes of Health

Gaugler, Joseph
Memory Matters: A Mobile Aid to Stimulate Reminiscing in Persons with Memory Loss (SBIR Phase I) (R43)
Moai Technologies, LLC./National Institutes of Health (Prime)

Gaugler, Joseph
A Proactive Health Monitoring Intervention for Dementia (R18)
Agency for Healthcare Research and Quality/U.S. Department of Health & Human Services

Gaugler, Joseph
Comparative Effectiveness of Dementia Caregiver Interventions: Towards a Person-Centered Care Planning Tool (K18)
Agency for Healthcare Research and Quality/U.S. Department of Health & Human Services

Gaugler, Joseph
The Dementia Caregiver Care Planning Tool: Development and Pilot Implementation (R03)
Agency for Healthcare Research and Quality/U.S. Department of Health & Human Services

Hooke, Mary
Phenotypic and Genotypic Associations with Symptom Clusters During Childhood Leukemia Treatment
Duke University/National Institutes of Health (Prime)

Hooke, Mary
COG Foundation CureSearch AYA Grant 2013
The Children’s Hospital of Philadelphia

Kaas, Merrie
Enhancing Interprofessional Integrative Psychiatric/Mental Health Nurse Practitioner Education to Address Health Care of Persons with Psychiatric Disorders and Other Chronic Conditions
Health Resources and Services Administration/U.S. Department of Health & Human Services
Grant Awards

Kubik, Martha
School Nurse-Directed Secondary Obesity Prevention for Elementary School-Aged Children (R01)
National Institute of Nursing Research/National Institutes of Health

McMahon, Siobhan
Enhancing Motivation for Physical Activity to Reduce the Risk of Falls Among Community-Dwelling Older Adults (KL2)
Clinical and Translational Science Institute (CTSI)/National Institutes of Health

McMorris, Barbara
Multifactorial Intervention for Falls Injury Prevention
Essentia Institute of Rural Health/National Institute on Aging/National Institutes of Health (Prime)

Monsen, Karen
Transforming Evidence-based Obesity Guidelines into Clinical Practice
Otter Tail County/Minnesota Department of Health

Mueller, Christine
Regulating Licensed Nursing Practice in Nursing Homes: Enacted RN and LPN Scopes
Duke University/National Council of State Boards of Nursing (Prime)

Mueller, Christine
Evaluating a Comprehensive State-Level Model to Improve Nursing Home Quality
Indiana University/Agency for Healthcare Research and Quality/U.S. Department of Health & Human Services (Prime)

Mueller, Christine
Performance-Based Incentive Payment Program (PiPP) Evaluation/"Older Adult Services Community Consortiums" Program Evaluation
Minnesota Department of Human Services

Mueller, Christine
New Careers in Nursing Scholarship Program-University of Minnesota
Robert Wood Johnson Foundation

Schorr, Erica
Utilizing Wearable Technology to Monitor Physical Activity and Sleep After Coronary Revascularization (Pre-K)
Clinical and Translational Science Institute (CTSI)/National Institutes of Health

Sieving, Renee
Encuentro! Community Partnerships for Healthy Youth Development
UMN Prevention Research Center

Sieving, Renee
MN Project Connect Client Outcomes Evaluation
Minnesota Coalition for Battered Women/U.S. Department of Health & Human Services (Prime)

Sieving, Renee
Understanding the Context of Northern Plains American Teen Pregnancy (P20)
Sanford Health/National Institutes of Health (Prime)

Talley, Kristine
Restorative Cares Effect on Disability in Long-Stay Nursing Home Residents (R03)
National Institute on Aging/National Institutes of Health

Talley, Kristine
Preventing Toileting Disability in Frail Older Women (KtoR01)
Clinical and Translational Science Institute (CTSI)/National Institutes of Health

Treat-Jacobson, Diane
Exercise Training to Reduce Claudication: Arm Ergometry (R01)
National Heart, Lung, and Blood Institute/National Institutes of Health

White, Kathryn
Nurse Anesthetist Traineeship Program (NAT)
Health Resources and Services Administration/U.S. Department of Health & Human Services

Wyman, Jean
FLAG-Facilitated Learning to Advance Geriatrics
Gerontological Society of America

Wyman, Jean
Center of Geriatric Nursing Excellence (MnHCGNE)
The John A. Hartford Foundation

Wyman, Jean
Jonas Nurse Scholar Program
Jonas Center for Nursing Excellence

Yu, Fang
Aerobic Exercise in Alzheimer’s Disease: Cognition and Hippocampal Volume Effects (R01)
National Institute on Aging/National Institutes of Health


Pacheco, L. R., Medeiros, M., & Garcia, C. M. (2014). The voices of Brazilian women breaking free from intimate partner violence. Journal of Forensic Nursing, 10(2), 70-76.


Public Health Standout Named Nurse Faculty Scholar

Karen Johnson's Research Looks at Students Attending Alternative Schools

by Brett Stursa

Karen Johnson hit the ground running after earning a PhD degree at the School of Nursing in 2012. Two months after defending her dissertation, she started as a tenure-track assistant professor in the School of Nursing at the University of Texas at Austin. Today, she is the principal investigator on three grants and was recently named a prestigious Robert Wood Johnson Foundation Nurse Faculty Scholar. We talked with Johnson about her plans for the $350,000 award, her interest in students attending alternative schools and what she misses about Minnesota.

Q: Congratulations on being named a RWJF Nurse Faculty Scholar. How does it feel to know you are one of 12 scholars in the country the RWJF believes shows strong promise as a future leader?
I am honored and humbled to know that RWJF recognizes the unique and important role nurse leaders can play in addressing the needs of our nation's most vulnerable young people and that they see potential in me as a future leader who can contribute to carrying out that mission.

Q: How will you be using your $350,000 award?
For my research project, I am working with alternative high schools in Central Texas to explore health-related policies at the schools as well as students' health behaviors, risk factors and protective factors. This population is often stigmatized by society and largely invisible from the public health surveillance efforts that shape our priorities for investing in youth. My ultimate goal, after this project, is to establish a public health surveillance system for alternative schools in Texas, much like the system that is in place for traditional schools in every state, where we repeat these surveys every two years.

Q: Was this research influenced by the Minnesota Student Survey?
This research is a direct result of the work I did with the Minnesota Student Survey for my dissertation and other manuscripts I wrote as a PhD student. Minnesota and Alaska are currently the only states that monitor health-risk behaviors among students in alternative schools, and the only time we got a national snapshot of this population was in 1998. If more states have data on this population, we can better highlight their needs and advocate for resources to reduce disparities.
Q: Why does this population interest you?
I've worked with vulnerable youth in many different capacities since I was an adolescent myself, and I have always admired the resilience vulnerable youth show to overcome the adversities life has thrown at them. Prior to coming to Minnesota, I worked as a public health nurse with young mothers in Colorado and saw how hard these young women had to fight in order overcome their own traumatic childhoods, raise a child and complete their education so that they might break the cycle of poverty and abuse. I've never been more inspired by a group of people.

Karen Johnson earned a PhD degree from the School of Nursing in 2012.

Q: How has your time in Minnesota at the School of Nursing impacted you as a researcher?
I would not be where I am, this early in my career, without the experiences and wonderful mentors I had at the University of Minnesota School of Nursing. In particular, the opportunity to be involved in the Center for Adolescent Nursing as a pre-doctoral fellow set me on a trajectory that made me competitive for a tenure-track position at a great institution without needing to complete a post-doc and ultimately made me a viable candidate for the RWJF Nurse Faculty Scholars Program. It is humbling to realize I am a graduate of a program that is so highly regarded across the nation in terms of adolescent health, positive youth development and public health nursing.

Q: What do you miss about Minnesota?
I really miss being immersed in a large and passionate interdisciplinary network of adolescent health and public health nursing researchers. It is a truly unique environment to have so many experts in one place, and it fuels one's passion for adolescent health and public health. I also miss being able to have frequent face-to-face contact with mentors like Lyn Bearinger, Barb McMorris, Karen Monsen, Renee Sieving and other adolescent health fellows.
Advance Your Nursing Career with the DNP Degree

Doctor of Nursing Practice graduates are in high demand as the need increases to improve health outcomes for all and care for people with complex, chronic conditions. As the highest clinical degree for nursing practice, the DNP degree is rapidly becoming the standard for advanced practice nurses, and will empower you to expand your impact, income and influence in an area of health care that interests you most.

DNP Specialties

Adult Health/Gerontological Clinical Nurse Specialist
Adult Health/Gerontological Nurse Practitioner
Family Nurse Practitioner
Health Innovation and Leadership
Integrative Health and Healing
Nurse Anesthesia
Nurse Midwifery
Nursing Informatics
Pediatric Clinical Nurse Specialist
Pediatric Nurse Practitioner
Psychiatric/Mental Health Nurse Practitioner
Public Health Nursing
Women’s Health Nurse Practitioner

A recent large scholarship gift from the Bentson Foundation provides $1 million to 50 DNP students each year.

Courses are delivered partially online, giving you the flexibility to balance life and learning.

Contact us at: prospectivednp@umn.edu
Visit us online at: Nursing.umn.edu

We want you back!

University of Minnesota
School of Nursing
Class Notes

Mary Koloroutis, MS ’87, was named the chief executive officer for Creative Health Care Management. Koloroutis, an international speaker and author, joined CHCM in 2000.

Sahra Noor, MS ’07, was selected by Minneapolis/St. Paul Journal as one of its 2015 40 Under 40 honorees, continuing annual recognition of top young business and community standouts. Noor is CEO of People’s Center Health Services.

Marjorie Page, DNP ’09, MS ’95, received the 2014 Moline Award presented by the Minnesota Organization of Leaders in Nursing. The award was created to honor individuals who have given above and beyond for MOLN and the medical community of Minnesota. It is recognition of demonstrated commitment, dedication, trust, energy, openness and optimism.

Jane Wrede, MS ’03, was named the director of Bethel University’s new online master’s degree program in nurse-midwifery.

Mindy Yoder, DNP ’11, was named dean of health sciences at University of St. Francis in Fort Wayne, Indiana.

Have you recently received a promotion, been hired for a new position or been honored with a special award? Let us know by going to www.nursing.umn.edu/alumni.

Scholarship Jewelry Sale Raises More Than $15,000

The one-day Jewelry Sale, hosted by the School of Nursing Foundation, raised more than $15,000, with proceeds funding scholarships for School of Nursing students. Since the first Jewelry Sale, in 1992, the effort has generated more than $200,000. The Jewelry Sale helps support the School of Nursing Foundation Leadership Scholarships. Seven of these scholarships were awarded to students this year.
In Memory

1931
Eva Bubolz Kloempken, BSN, of Hector, died Feb. 5 at the age of 106.

1938
Burnece Sorby Guntrum, BSN, of San Leandro, California, died Dec. 14, 2014, at the age of 97.

1941
Elaine Lois Nemitz Hallquist, BSN, age 94, died Nov. 19, 2014. After graduating from the University of Minnesota School of Nursing, she served as a nurse during World War II, on a college campus, in hospitals and with doctors in private practice.

1943
Helen Lauritson Rozycki, BSN, of Minneapolis, passed away Dec. 5, 2014, at the age of 92.

1946
Elizabeth Soderling Braun, BSN, of Tinton Falls, New Jersey, died in October of 2014.

1945
Agnes Olson Sherman, BSN, of Albert Lea, died Oct. 9, 2014.
Anne Harvey Zinga, BSN, of Cincinnati, Ohio, died Dec. 19, 2014.

1946
Alice Pearce, BSN, of Longmont, Colorado, died Nov. 26, 2014.

1948
Mary Hamilton, BSN, of Concord, New Hampshire, died Nov. 29, 2014.

Eileen Reynolds Mayr, BSN, of St. Louis Park, died Jan. 11, at the age of 92. A career Certified Nurse Anesthetist, she worked until age 70.


Phyllis Lorraine (Duggan) Dow, BSN, died Dec. 10, 2014, at the age of 87. A graduate of the School of Nursing and US Cadet (Nurse) Corps, she taught at the University of Arizona College of Nursing for 20 years.

1949
Constance Otten Wallinga, BSN, of Minneapolis, died Jan. 17, at the age of 89.

1952
Jeanne Ann Sturges Brandt, BSN, age 85, died Jan. 2. Jeanne’s daughter, Karen Monsen, is an associate professor at the School of Nursing.

Alice Dempsey, BSN, of Pensacola, Florida died Jan. 2, at the age of 93.

1953
Alma Walich, BSN, of White Bear Lake, died Jan. 6, at the age of 86.

1954
Stephanie Vincent Ness, BSN, of Wadena, died July 12, 2014.

Astrid Ravenholt, BSN, died in November 2014, in her home. She spent the majority of her career as a nurse with the US Foreign Service working in embassies in 10 countries in Asia, Africa, South America and Europe.

1955
Lorna Mill Barrell, BSN, died Sept. 16, 2014, at the age of 83. She was a supporter of the School of Nursing Foundation’s annual Jewelry Sale benefiting nursing scholarships, contributing jewelry from her personal collection and travels.

Susan Ott Rasmussen, BSN, age 82, died Oct. 11, 2014. As a public health nurse, she worked for the University of Washington on genetic studies.
1962
Rada Stanton, MNA, died Oct. 25, 2014 at the age of 87. During her last 20 years of employment, she worked at Indiana State Mental Hospital where she served as the director of nursing for a decade.

1963
Miriam Hazzard, BSN, age 74, died Dec. 27, 2014. Following graduation, she worked as a registered nurse, then as director of nursing at North Hennepin Community College, where she eventually served as dean of health careers and sciences.

1987
Barbara Jean (Coad) Whitman, MS, of Evart, Michigan, died Feb. 1. She was 77.

Also Remembered
Bernard Russell Queneau, died Dec. 7, 2014, at the age of 102. For almost 20 years, he stewarded the nursing students who received the Alva Wipperman Queneau Memorial Scholarship, which was a fund established in honor of his late sister-in-law by his brother Roland.

Kenneth Swanson, 91, died June 3, 2014, following a long career in health care administration and merchandising. A past trustee on the School of Nursing Foundation, he established the Enid O. and Kenneth T. Swanson Scholarship in honor of his first wife to benefit students at the School of Nursing.

Mary Weisensee, School of Nursing faculty emerita, died Aug. 26, 2014, at the age of 76.

Seeking nurse scientist for joint tenured appointment

The University of Minnesota School of Nursing in collaboration with University of Minnesota Health invites applications for a newly-created position to provide strategic leadership in the development and implementation of nursing research and innovation.

The individual will work closely with the Nursing Collaboratory, an integrated leadership framework created in 2013 to bridge and advance the common interests of the two organizations to improve outcomes, reduce costs and enhance patient experiences.

The individual will develop and lead an agenda for a shared nursing program of research, evidence-based practice and nursing outcomes. In addition, the individual will conduct his or her own program of research that fits the research vision and strategic direction of the School of Nursing and UM Health.

For More Information
Visit: www.nursing.umn.edu/employment
Email: Diane Treat-Jacobson, PhD, RN, at treat001@umn.edu
Dear Friends,

I want to tell you two stories. I recently attended the School of Nursing’s annual scholarship reception where scholarship benefactors and student scholarship recipients came together and inspired each other. They shared stories about why they made these gifts and the impact these gifts are having. Thanks to the excellent leadership of the Foundation Board and its chair Janet Stacey there were 20 percent more donors and students at this event than the previous year. I want to share the message of one student who benefited from a significant Doctor of Nursing Practice scholarship she received from the Bentson Foundation:

“I want to express how grateful I am for the generous award that is enabling me to attend graduate school ... I grew up in rural Minnesota in a large, poor family. Because of your generosity, I will be able to work in underprivileged areas that are not able to provide as much compensation. Thank you so much for investing in my education and ultimately in the lives of underprivileged individuals here and across the world.”

The second story involves the important work of our Nursing Alumni Society. Each year, the society recognizes the accomplishments of our graduates, and this year, Molly Secor-Turner received the Distinguished Alumni Humanitarian Award. Not only has Secor-Turner earned three degrees from the School of Nursing, including her PhD degree in 2008, but she is now an assistant professor in the Department of Nursing at North Dakota State University. There, she has spearheaded community-based programming and outreach to girls in remote areas of Kenya. Working with her colleagues she received a $1.2 million grant from the Department of Health and Human Services Administration to evaluate a program aimed at preventing pregnancy and sexually transmitted diseases among teens. We are proud to have the honor of recognizing our exceptional and distinguished alumni.

While these are only two student’s stories, I believe they are your stories too. Some of you have studied here and benefited from others generosity. Some of you are friends who have benefited from our faculty’s research and care. While you have your own unique connection to the School of Nursing, together as alums and friends you are having a profound impact on the world. Thank you for doing your part!

John Kilbride
Director of Development
Endowments for faculty positions are critical for the School of Nursing to attract and retain outstanding researchers and educators.

The school currently has six named chairs and professorships, funding innovative and transformative research. Unlike most endowed chairs and professorships nationally, these awards supplement research and discovery rather than supplant faculty salaries.

To learn more about endowed naming opportunities, please contact John Kilbride, director of development, at 612-624-2428 or kilbride@umn.edu.

Naming Your Legacy
Endowed Professorships, Chairs Support Faculty Research

$8.2 million Total value of chair and professorship endowment fund, as of January 2015

$20,000 per year Endowed Chair Awards

$10,000 per year Endowed Professorship Awards

3 Years in each term, which is renewable
Development News

Bentson Scholarship Makes DNP Degree Possible

by Brett Stursa

As a pre-licensure nursing student, Naomi Toenies took several trips to Uganda, Africa to study the health care system there. “I was saddened by the lack of support and resources that I encountered in their health care system, particularly in the rural areas,” said Toenies.

Now a registered nurse working on a medical-surgical unit, Toenies knows she could bring her skills to Uganda. She aspires to have a greater impact so she looked into graduate degree programs.

She found the ideal fit in the University of Minnesota School of Nursing’s Doctor of Nursing Practice degree, as she appreciated that the program placed an emphasis not only on being a knowledgeable nurse practitioner, but also on developing nurse leaders who initiate and effect change. After getting accepted into the DNP program’s nurse practitioner specialty, Toenies was concerned she wouldn’t be able to afford it. The concern dissipated when she learned she was one of 40 students named a Bentson Scholar and was awarded a $20,000 scholarship. “I am forever grateful to the Bentson Foundation for their generosity and the impact they will have on health care because of their investment in DNP students like me,” said Toenies. The Bentson Foundation has committed to awarding $10 million in scholarships for DNP students in the University of Minnesota’s program.

Naomi Toenies credits her Bentson Foundation Scholarship for making her DNP education possible.

After earning her DNP degree, Toenies hopes to work in rural areas in developing countries. “I want to use my knowledge and skills to help equip underprivileged individuals with the education, knowledge and support they need to take responsibility for their own health,” said Toenies.

School of Nursing Foundation Board of Trustees, 2015

Dawn Bazarko, DNP, MPH, RN, United Health Group
Mary Broderick, PhD, Past Chair, Catholic Elder Care, Retired
Connie White Delaney, PhD, RN, FAAN, FACMI, Professor and Dean, School of Nursing
Susan Forstrom, MSN, Treasurer, Creative Health Care Management

Ann Garwick, PhD, RN, LP, LMFT, FAAN, Professor and Associate Dean, School of Nursing
John Kilbride, Director of Development, School of Nursing
June Lapidus, Southdale Psychology Associates, Retired
Harry M. Lefto, BA, Harry Lefto Software
M. Ann Moser, BSN, MBA, RN, FACHE, FAAHC, Dennis R. Moser & Associates

46 minnesota nursing | nursing.umn.edu/magazine
The students shared their aspirations with Karlstrand and reflected on the moment they opened the email from the school announcing their scholarship award.

“It was an answered prayer,” said Katrina Cuffey, who aspires to work as a nurse in end-of-life care. “My husband and I were trying to figure out how we would cover child care expenses this spring, and we were looking at high-interest loans. And then this e-mail came.”

Karlstrand, who has no family, shared with students how he was able to live frugally and retire at age 50. He does not own a TV, phone or computer (using the library’s phone and internet occasionally). Before getting sick two years ago, he traveled extensively, hiking for months through Southeast Asia and Latin America. He is also a regular volunteer for an organization that provides health services and school supplies to remote areas a Guatemala.
Right: A BSN student shows high school students how to take blood pressure during the Scrubs, Gloves and Microscope event in January. The events helps high school students explore the nursing field.

Above: Fall Commencement took place Dec. 12 at Northrop. Dignitaries included DNP Student Speaker Angela Mattson, Academic Health Center’s Tucker LeBien, Regent Dean Johnson, Morris Vice Chancellor Bart Finzel, Dean Connie White Delaney, Commencement Speaker Roxanne Fernandes, Alumni Board President Wendy Sharpe and MN Student Speaker Susanna Eldredge.

Eleven Master of Nursing, Doctor of Nursing Practice and PhD students were inducted into the Zeta Chapter of Sigma Theta Tau International in November.
The Nursing Scholarship Reception, recognizing scholarship recipients and donors, was held in October. BSN student Ying Thoa with donors Don and Carol Kelsey.

A public presentation of senior honors research projects was held in December. Back row, from left, Associate Professor Carolyn Garcia, Kristen Rogstad, Kalina Parsons, Mariissa Giers, Genna Hempen and Associate Professor Barb McMorris. Front row, from left, Jenna Gruenwald, Liz Schneider, Alayna Gifford, Emily Mathews and Sidni Olson.

School of Nursing staff and faculty celebrated Bentson Scholars with Bentson Foundation members in October. From left, Alumni Senior Director Laurel Mallon, Development Officer Maria McLemore, Dean Connie White Delaney, Bentson Foundation CEO Judi Dutcher, Associate Dean Christine Muller, Bentson Foundation’s George Reilly, Development Director John Kilbride, University of Minnesota Foundation’s Bob Burgett and Bentson Foundation Treasurer Mark Niblick.
BY THE NUMBERS

Advance Practice Registered Nurses

5,757
Total number of newly-licensed APRNs in Minnesota, as of Jan. 20

901
Total number of University of Minnesota-educated licensed APRNs in Minnesota

2,080
Number of hours clinical nurse specialists and nurse practitioners must practice prior to independent practice

19
Number of states that allow advance practice nurses to practice to their full scope

Clinical Associate Professor Mary Chesney, PhD, RN, CNP, was issued the first APRN license by the Minnesota Board of Nursing.