USING BIG DATA to take the error out of trial and error

Personalizing statin treatment
ON THE COVER
06 Using big data to take the error out of trial and error
Personalizing statin treatment
12 Mentoring the next generation of nurses
More than role models, preceptors show students how to handle real-life curveballs
16 Barriers to birth control
DNP project improves access to contraceptive implant
18 Health care from an indigenous-centered perspective
DNP grad inspired by Standing Rock’s integrative approach

SECTIONS
04 From the Dean
06 Research
12 Education
20 Outreach
26 Center News
30 School News
40 Alumni News
44 Development News

FOLLOW US
University of Minnesota School of Nursing
@UMNNursing
Flickr: SCHOOLOFNURSING
RSS: www.nursing.umn.edu/rss

Read Minnesota Nursing online at www.nursing.umn.edu/magazine.

To receive a notice when the current issue is posted on the school’s website, send an email to nursnews@umn.edu.

This publication is available in alternative formats upon request. Direct requests to the managing editor at nursnews@umn.edu.

The University of Minnesota is committed to the policy that all persons shall have equal access to its programs, facilities, and employment without regard to race, color, creed, religion, national origin, sex, age, marital status, disability, public assistance, veteran status, or sexual orientation. The University of Minnesota is an equal opportunity educator and employer.

UNIVERSITY OF MINNESOTA SCHOOL OF NURSING

OUR MISSION
To generate knowledge and prepare nurse leaders who create, lead and participate in holistic efforts to improve the health of all people within the context of their environments.

OUR VISION
The School of Nursing envisions a world where nurses lead collaborative efforts to attain optimal health for all people.

DEAN
Connie White Delaney, PhD, RN, FAAN, FACMI

SENIOR EXECUTIVE ASSOCIATE DEAN FOR RESEARCH
Ann Ganick, PhD, RN, LMFT, LP, FAAN

ASSOCIATE DEAN FOR ACADEMIC PROGRAMS
Christina Mueller, PhD, RN, FAAN, FGSA

ASSOCIATE DEAN FOR FACULTY PRACTICE, PARTNERSHIPS AND PROFESSIONAL DEVELOPMENT
Tom Clancy, PhD, MBA, RN, FAAN

BOARD OF VISITORS
Clara Adams-Ender, chief nurse executive, Army Nurse Corp. (ret.); June Cook-Lapidus, president, School of Nursing Foundation; Melanie Dresher, dean emeritus, Rush University College of Nursing; David Durenberger, former United States senator; Rahil Kanwana, senior vice president for clinical affairs and chief medical officer, Minnesota Hospital Association; Richard Noting, senior fellow, Institute for Healthcare Improvement; John Seeling, president and CEO, Safe By Design; Joann Viventi, executive vice president, UnitedHealth Group; Michael Rohovsky, ret. corporate office of science and technology associate, Johnson & Johnson; David Sorensen, ret. senior vice president and chief clinical officer, Genesis HealthCare; and Jonathan M. Zenilman, chief, Infectious Diseases Division, Johns Hopkins Bayview Medical Center and professor at Johns Hopkins Bloomberg School of Public Health

DIRECTOR OF STRATEGIC COMMUNICATIONS
Barb Schlaefer

SENIOR EDITOR
Brett Stursa

PHOTOGRAPHERS
Tim Rummelhoff, Tom Steffes, Scott Streble

DESIGNER
Tammy Rose

STUDENT DESIGNER
Hans Slade

FOLLOW US
University of Minnesota School of Nursing
@UMNNursing
Flickr: SCHOOLOFNURSING
RSS: www.nursing.umn.edu/rss
Advancing health with big data science

Dear Friends,

All of us are committed to advancing the health and well-being of everyone. As nurses, our daily lives are filled with questions about what is best for our patients, families, communities and entire populations.

We ask: What are the essential components to raising healthy, resilient children? How will I support this homeless teen? What is the most effective staffing model for a hospital oncology unit? What will be the most effective way to support this patient’s management of his diabetes? How do we improve care coordination across the continuum of care?

The infinite number of questions we ask and answer each day are at the heart of nursing practice and research. Our capacity to answer these questions in real time and with precision relies increasingly on big data science in nursing and health care.

When I joined the earliest pioneers in the field of nursing informatics in 1987, I was drawn to the possibility that data, their experiences, environments gather, compare and analyze patient data, their experiences, environments could reveal the most effective ways to reduce costs, enhance the patient experience, improve outcomes, and, most significantly, empower and give voice to the patient. These possibilities have been realized in thousands of ways since then. Today, I am part of a team of big data scientists and nurse informaticians at the University of Minnesota who are leading the way.

Robin Austin, Chih-Lin Chi, Thomas Clancy, Madeline Kerr, Karen Monsen, Lisane Pruinelli, Bonnie Wostra and I are conducting research utilizing massive patient data sets, including those available through our partnership with OptumLabs. We share our informatics curriculum expertise with college and university faculty nationwide, leveraging support from the Gordon and Betty Moore Foundation and in partnership with the American Association of Colleges of Nursing. This spring, we will host the Fifth-annual Nursing Knowledge: Big Data Conference with leaders from nursing, health systems, industry, government and academia to advance a national action plan for sharable, comparable data.

As the No. 2-ranked graduate school in nursing informatics in the nation by US News and World Report, we are dedicated to building the capacity of our students, colleagues and partners to harness the power of big data to answer the questions at the heart of nursing. We keep the soul in our science.

As a society, our evolving capacity to harness the power of big data to answer the questions at the heart of nursing.

Our students, colleagues and partners to harness the power of big data to answer the questions at the heart of nursing.

The right care at the right time

The feeling is mutual

by Barb Schlafly

Norman Fifield, 95, has led a rich life, serving in World War II, supporting his family and enjoying a 35-year career in telecommunications.

Today, he lives in an assisted living facility in the Twin Cities with several chronic health conditions that require coordination among members of his care team, who include an acute nurse, a hospice nurse, a social worker, a physician, his daughter and a primary care nurse practitioner.

“The care team revolves around my dad, rather than us driving around town to get him the care that he needs from people who do not communicate with one another,” said his daughter, Barbara Brandt, PhD; associate vice president for education at the University of Minnesota Academic Health Center. “This is the right interprofessional model of care for my dad at the right time.”

Dianne Willer-Sly, DNP, APN, CNP, sees Fifield at least monthly in his home and communicates often with other members of the care team as well as his daughter.

She makes rounds together with her physician colleague, Rachel Burton, DO, who sees residents at the facility on a quarterly basis.

“I see my job as not only the primary care provider, but also as a sort of case manager for my patients,” said Willer-Sly, who also teaches at the School of Nursing. “The buck stops with me. I may call the hospice nurse or bring in the pharmacist for a consultation. I contact specialists occasionally. It’s counterproductive to transport a fragile patient out on a winter day, simply for a routine visit.”

Willer-Sly likes to get to know her geriatric patients well, spending two to three hours with them at the initial visit.

She also shares her cell phone number with family members. “We are a team. I like to know what is going on. Did something happen over the weekend? Is he doing, he had some devastating falls that may have been prevented with better communication.”

Brandt says her personal experience with her father’s current care team is “a model that should be replicated.”

“Students in the health professions need to see and experience this approach to care,” she said.

Connie White Delaney

Professor and Dean

Photo: Tim Rummelhoff

www.nursing.umn.edu | 5
USING BIG DATA to take the error out of trial and error

Personalizing statin treatment

by Barb Schlaefer

For people with elevated cholesterol, a growing array of medication options promises to more effectively reduce risks for heart attacks, strokes and related problems.

These drugs, known as statins, are prescribed to people for whom diet and lifestyle changes have not been effective in lowering dangerous cholesterol levels. Since no two patients are alike, selecting the most effective statin and dosage for each person can be a lengthy process of trial and error.

A team of health care and data experts is studying the experience of more than 37,000 cardiovascular disease patients with the goal of creating a tool to help providers identify the optimal individualized treatment plan for each patient. Analyzing health claims data as well as clinical and demographic characteristics of these patients over time, the multi-disciplinary team is identifying patterns leading to answers.

“By applying a computational approach to the data, similar to approaches used by Amazon or Netflix when they suggest products or movies you might like, we will be able to predict with a very high degree of certainty, which treatment can be most effective,” said Chih-Lin Chi, PhD, MBA, assistant professor at the School of Nursing and principal investigator on the first phase of this multi-year study.

“The goal is to help cardiology and primary care providers be more proactive, instead of reactive, identifying the statin agent and dose that will have the greatest cholesterol-lowering benefit, with the least risk of adverse side effects and best possible outcome for the type of patient they are serving,” said Chi.

Chih-Lin Chi, PhD, MBA, assistant professor at the School of Nursing and principal investigator on the first phase of this multi-year study

continued on page 8


continued from page 6

TOO MUCH FOR ONE BRAIN TO KNOW

Today providers are inundated with information as discoveries are made and new drugs are introduced. Those who care for people with cardiovascular disease today have seven different cholesterol-lowering statin medications and dozens of dosage plans to consider. Challenged to stay current on new drugs and guidelines, many rely heavily on their own experience in treating their patients to determine the best treatment plan for each patient. “We have current guidelines for treating patients based on their risk for a cardiovascular event, like heart attack or stroke, and their potential to benefit from treatment,” said study investigator Jennifer Robinson, MD, professor, cardiology researcher at the University of Iowa. “However, we currently have no way to factor in certain patient data, nor can we factor in the risk for harm. That is part of what this first phase of the study does.”

While statin use has increased dramatically over the last 20 years, in part due to adverse reactions such as muscle, kidney or liver damage perceived to be caused by the medication.

STUDYING TRUE CAUSE AND EFFECT WITH PRECISION

Working in collaboration with OptumLabs, which curates one of the largest health-related data warehouses in the world with de-identified data on 160 million lives over 20 years, the team began by carefully selecting its participant criteria. The initial research cohort includes more than 37,000 de-identified patient records.

The first phase of the project involves a study of adverse reactions to statin treatment. Subsequent phases will assess and weigh the benefits, risks, outcomes and costs of statin agents and dosage plans for individual types of patients. “We seek to cluster different types of patients, analyzing the data hundreds of ways, to identify how each type of patient responded under different types of treatment plans,” Chi said.

The computer processing power needed to analyze tens of thousands of detailed records through a complex series of algorithms requires computational capacity equal to more than 500 times that of a standard office computer, said Chi.

“Chih-Lin’s work is very exciting for its methodological sophistication and application of machine learning methods to the analysis of health care data. The application of machine learning methods in health care is in its infancy,” said William Crown, chief scientific officer for OptumLabs, which is based in Boston, Massachusetts. “This kind of project can potentially find its way into translation and care very quickly by being imbedded into the tools that doctors and nurses are already using.”

Chi says the findings of this big data science work will be rigorously tested, and the results refined, through clinical trials. The end product will be a software application that may ultimately be integrated into the electronic health records system that provides individualized prescription recommendations to providers in real time, as they see patients and review their blood cholesterol levels in the clinical setting.

“Using predictive modeling, this study creates a pathway to precision medicine, or individualized care, to treat patients,” said Robinson, who co-authored the national blood cholesterol guidelines currently used by providers. As the principal investigator and computational expert on the team, Chi says this work cannot be done effectively without a diverse team of people who bring essential clinical, research and entrepreneurial perspectives to the work.

The current research team is comprised of Thomas Clancy, professor, University of Minnesota School of Nursing; Jennifer G. Robinson, professor, University of Iowa College of Public Health and director, Preventive Intervention Center; Peter J. Tonellato, professor, University of Wisconsin–Milwaukee School of Public Health and senior scientist, Harvard Medical School; Terence J. Adam, associate professor, University of Minnesota College of Pharmacy, associate director and core faculty, University of Minnesota Institute for Health Informatics; Chih-Lin Chi, assistant professor, University of Minnesota School of Nursing and core faculty, University of Minnesota Institute for Health Informatics; Jin Wang, PhD student, University of Minnesota School of Nursing; and the team at OptumLabs.

Finding the right records

When the research team tapped into the OptumLabs data warehouse, it had access to de-identified health records of 130 million people. Finding the right records to work with required a process of carefully selecting participant criteria.

"Using predictive modeling, this study creates a pathway to precision medicine, or individualized care, to treat patients." – Jennifer Robinson, MD, cardiology researcher at the University of Iowa and study investigator
**What moves seniors to move?**

Friendly, social comparison may be key

by Barb Schlaefer

For older adults, an accidental fall can be a pivotal event causing lasting changes in mobility, independence, health and well-being. Because the costs and consequences of falls among older adults are significant, new research on fall prevention has gained attention nationwide.

Not surprisingly, consistent physical activity to maintain strength and balance in the legs is key to preventing falls. Less clear, however, is the most effective way to inspire older adults to exercise regularly. A recent clinical trial led by Assistant Professor Siobhan McMahon, PhD, MPH, APN, GNP-BC, explored this question, by comparing different approaches for encouraging increased physical activity.

The study’s 102 participants each received Fitbits, which track physical activity. They were assigned to one of four experimental groups. All groups were given the same instructions and practiced recommended physical activities. However, each group was given a different mix of behavior change strategies to encourage them to integrate these physical activities into their everyday lives.

McMahon says her team designed the OptumLabs model to move research along and into practice swiftly. “One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets,” he said. “We are creating forums where partners are sharing their knowledge. That way, individual researchers don’t have to learn and discover this knowledge on their own.”

As the only school of nursing involved in the research and innovation collaborative, the School of Nursing’s expertise among peers about physical activity motivated participants.

McMahon’s team called the interpersonal strategy increased their physical activity more than others in the study, for up to six months after the intervention ended. This set of interpersonal strategies included small-group activities such as friendly social comparison. This approach required dialogue and exchange between peers — collaborative learning — about physical activity goals and experiences to elicit individual change.

The other set of strategies was called intrapersonal because it involved more introspective activities such as receiving formal instruction, creating personal goals and plans and then discussing these in small groups. Although the intrapersonal strategies are traditional — used often in physical activity programs for younger adults — it was the interpersonal strategies in this study that elicited significant increases in participants’ physical activity.

McMahon says she was initially surprised by the findings, but should not have been. “When we look at lifespan developmental theory and the preferences of older adults, our findings make sense,” she said. “Older adults tend to value social connections that are emotionally satisfying. It may be that the exchange of knowledge and expertise among peers about physical activity motivated participants to engage more in physical activity in their everyday lives.”

While interpersonal strategies may be an innovative way to encourage older adults to move more, further research is needed before translating these strategies into practice. McMahon’s next study will attempt to reproduce these findings with a larger clinical trial and investigate intervention effects on falls and quality of life. Results could inform practice for falls prevention.

This KL2 study was funded by grants from the University of Minnesota Center for Translational Science Institute and a Grant in Aid.

---

**A super-sized research and innovation cohort**

The School of Nursing is one of 27 members of the OptumLabs research and innovation collaborative, which convenes experts from health care, industry and academic institutions to explore high-impact research questions that can lead to improved practices and treatment in health care.

With a national data warehouse containing de-identified data on more than 160 million patient lives, OptumLabs provides the school and the rest of the University of Minnesota with the opportunity to partner with diverse organizations to tackle complex research questions.

“There are several large data sets for conducting big data health research in the oldest-old, but the OptumLabs collaborative is unique in many respects,” said Thomas Clancy, PhD, MBA, RN, FAAN, associate dean for practice, partnerships and professional development at the University of Minnesota School of Nursing. “The ability to link de-identified clinical and claims data on patients is extremely valuable. As a partner in an academic–corporate partnership, we are collectively building our capacity to extract, process and analyze the data in new ways, for new discoveries.”

The Clinic project described on the previous page is one of eight research projects underway at the University of Minnesota that utilizes the OptumLabs Data Warehouse. “At OptumLabs, each of our partners brings something different and unique,” said William Crown, chief scientific officer for OptumLabs. “Our model is that we are the facilitators, providing the data, the tools, the environment, the architecture and the knowledge about the data, but it’s actually our partners who are doing the work, often collaboratively.”

---

**OPTUMLABS COLLABORATIVE MEMBERS**

- AARP
- Age UK
- American Cancer Society
- American Heart Association
- AMGA
- Boston Scientific
- Brown University School of Public Health
- Brown University School of Public Policy
- The Global CEO Initiative
- Harvard Medical School Department of Health Care Policy
- Imperial College London
- Johns Hopkins Bloomberg School of Public Health
- Lehigh Valley Health Network
- LSE Health
- Mayo Clinic
- Medical Research Institute
- MIT Sloan School of Management
- Optum
- Oxford Academic Health Science Network
- Rensselaer Polytechnic Institute
- ResMed
- Tufts Medical Center
- University of California Health
- University of Maryland
- University of Minnesota School of Nursing
- University of Rochester
- US Department of Health and Human Services
- Yale University

---

“One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets.”

— William Crown, chief scientific officer for OptumLabs

Crown says the OptumLabs model is designed to move research along and into practice swiftly. “One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets,” he said. “We are creating forums where partners are sharing their knowledge. That way, individual researchers don’t have to learn and discover this knowledge on their own.”

As the only school of nursing involved in the research and innovation collaborative, the School of Nursing’s expertise among peers about physical activity motivated participants.

McMahon says her team designed the OptumLabs model to move research along and into practice swiftly. “One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets,” he said. “We are creating forums where partners are sharing their knowledge. That way, individual researchers don’t have to learn and discover this knowledge on their own.”

As the only school of nursing involved in the research and innovation collaborative, the School of Nursing’s expertise among peers about physical activity motivated participants.

McMahon says her team designed the OptumLabs model to move research along and into practice swiftly. “One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets,” he said. “We are creating forums where partners are sharing their knowledge. That way, individual researchers don’t have to learn and discover this knowledge on their own.”

As the only school of nursing involved in the research and innovation collaborative, the School of Nursing’s expertise among peers about physical activity motivated participants.

McMahon says her team designed the OptumLabs model to move research along and into practice swiftly. “One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets,” he said. “We are creating forums where partners are sharing their knowledge. That way, individual researchers don’t have to learn and discover this knowledge on their own.”

As the only school of nursing involved in the research and innovation collaborative, the School of Nursing’s expertise among peers about physical activity motivated participants.

McMahon says her team designed the OptumLabs model to move research along and into practice swiftly. “One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets,” he said. “We are creating forums where partners are sharing their knowledge. That way, individual researchers don’t have to learn and discover this knowledge on their own.”

As the only school of nursing involved in the research and innovation collaborative, the School of Nursing’s expertise among peers about physical activity motivated participants.

McMahon says her team designed the OptumLabs model to move research along and into practice swiftly. “One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets,” he said. “We are creating forums where partners are sharing their knowledge. That way, individual researchers don’t have to learn and discover this knowledge on their own.”

As the only school of nursing involved in the research and innovation collaborative, the School of Nursing’s expertise among peers about physical activity motivated participants.

McMahon says her team designed the OptumLabs model to move research along and into practice swiftly. “One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets,” he said. “We are creating forums where partners are sharing their knowledge. That way, individual researchers don’t have to learn and discover this knowledge on their own.”

As the only school of nursing involved in the research and innovation collaborative, the School of Nursing’s expertise among peers about physical activity motivated participants.

McMahon says her team designed the OptumLabs model to move research along and into practice swiftly. “One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets,” he said. “We are creating forums where partners are sharing their knowledge. That way, individual researchers don’t have to learn and discover this knowledge on their own.”

As the only school of nursing involved in the research and innovation collaborative, the School of Nursing’s expertise among peers about physical activity motivated participants.

McMahon says her team designed the OptumLabs model to move research along and into practice swiftly. “One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets,” he said. “We are creating forums where partners are sharing their knowledge. That way, individual researchers don’t have to learn and discover this knowledge on their own.”

As the only school of nursing involved in the research and innovation collaborative, the School of Nursing’s expertise among peers about physical activity motivated participants.

McMahon says her team designed the OptumLabs model to move research along and into practice swiftly. “One of the most exciting aspects of our collaborative approach is the learning that occurs as we work together with these big integrated data sets,” he said. “We are creating forums where partners are sharing their knowledge. That way, individual researchers don’t have to learn and discover this knowledge on their own.”

As the only school of nursing involved in the research and innovation collaborative, the School of Nursing’s expertise among peers about physical activity motivated participants.
Mentoring the next generation of nurses

More than role models, preceptors show students how to handle real-life curveballs

by Meleah Maynard

Mary O’Donnell became a nurse preceptor shortly after starting work at the University of Minnesota’s Community-University Health Care Clinic as a pediatric nurse practitioner in 2003.

Fourteen years and a Doctor of Nursing Practice degree later, it’s a role she still enjoys and feels committed to because she wants to help the next generation of nurses. “I will always remember the nurse practitioner preceptors who made time for me and reaffirmed why I wanted to do what I do,” she said. “This is a way that I can give back.”

There’s something in it for O’Donnell, too. Being a preceptor, she says, makes her a better nurse practitioner. “I learn a lot from my students. They’re aware of the newest thinking and evidence-based practice, and we both learn as we work through problems together. It’s fun and it keeps me on my toes.”

Bridging the gap between the classroom and clinical practice, preceptors are experienced nurses who are knowledgeable about what they do and also want to teach others. By providing supervision in clinical settings as diverse as hospitals, community clinics, nursing homes, birthing centers and school-based health programs, preceptors serve as mentors to pre-licensure and DNP nursing students, helping them develop vital critical-thinking skills on the job.

Currently, the University of Minnesota School of Nursing has about 200 preceptors working with its pre-licensure students, 250 DNP preceptors and more are always needed. DNP students are paired with preceptors according to their specialty. Pairs typically work together for a semester, usually one or two days a week. “Nursing students have learned from preceptors since as early as the Florence Nightingale days in the late 1800s, and they continue to be a core part of nursing education today,” said Christine Mueller, PhD, RN, FAAN, associate dean for academic programs. “Just like medical students, nursing students need real-life experiences to prepare them to be safe and competent practitioners.”

Kari Erickson, who will graduate from the DNP program in May, has learned from more than 10 preceptors over the course of her nursing education. One of her favorites was Mary O’Donnell, whom she was recently paired with at CUHCC. Though Erickson worked seven years in pediatric intensive care before returning to school to earn her DNP degree, she was nervous about practicing at CUHCC, where patients are often immigrants and refugees who may not speak English or be comfortable with American health care settings.

Working with O’Donnell has done more than allay those fears. Erickson says the experience made her a better nurse. “I’ve learned so much about talking to families that come from around the world. Mary is always completely gracious and never gets anxious, even when an interpreter is not immediately available and you just have to do the best you can without them.”

Beyond role modeling, Erickson is also grateful to O’Donnell for making her think for herself. When reporting on a patient, for example, O’Donnell would ask: What are the patients really telling you? What are they afraid of? Do you think you have all of the information you need? “You’re so afraid to make mistakes as a student, but she asks questions without judgment. She would say, ‘Let me hear your best guess and rationale and we’ll go from there and get to where we’re supposed to be,’” Erickson said. “I learned much more than how to practice as a pediatric nurse practitioner. I learned nuances and semantics and how to handle the unexpected because she handled them like a pro.”

To learn more about becoming a preceptor, go to http://z.umn.edu/preceptor.

Meleah Maynard is a Minneapolis-based writer and editor.
As the chief nursing informatics officer for the Mayo Clinic enterprise, Jason Fratzke is immersed in helping lead a clinic-wide transition to a new, single electronic health record system. He says his experiences as a bedside nurse, an administrator and a PhD student at the University of Minnesota School of Nursing all contributed to his preparation for this massive project.

“We are implementing a single and converged electronic health record system for the first time, meaning we have to all move together,” he said. “When we go live, every nurse on the inpatient side will have their own dedicated smart phone. We will be able to do things we have never been able to do.”

He says the PhD program at the School of Nursing has been particularly relevant to his work at the Mayo Clinic, a world-renowned research-intensive organization with facilities in Wisconsin, Iowa, Arizona, Florida and Minnesota.

“The PhD education gives me an advantage in committees and other groups at Mayo,” he said. “I understand the vernacular, the research implications and am able to contribute to the conversation, represent nursing and lead the conversation in some cases.”

“Clinical nurses with PhDs in nursing informatics bring a rare and valuable set of perspectives and skill sets to the health care system,” said School of Nursing Dean Connie White Delaney, PhD, RN, FAAN, FACMI, who is Fratzke’s PhD adviser. “An electronic health records system can meet all government requirements, but if it’s impractical for nurses to use or generates useless information, it serves no one.”

Fratzke started his nursing career as a pediatric nurse and then became an emergency room nurse manager while he earned a master’s degree in nursing at the University of Minnesota. Now as a chief nursing informatics officer, there have been many instances, he says, when PhD coursework was directly applicable to something happening at work. “I’m living and breathing it while I’m learning. Whether it was around data vocabulary, standardization and classification of data, research methodologies — it all applies,” he said.

PhD education helps Mayo’s CNIO launch EHR system

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 OFFERINGS PRIMARILY ONLINE
Health Innovation and Leadership
Nursing Informatics
Post-master’s DNP

ADDITIONAL DNP SPECIALTIES
Adult Health/Gerontological
Clinical Nurse Specialist
Adult Health/Gerontological
Nurse Practitioner
Family Nurse Practitioner
Integrative Health and Healing
Nurse Anesthesia
Nurse Midwifery
Pediatric Clinical Nurse
Specialist
Pediatric Nurse Practitioner
Psychiatric/Mental Health Nurse
Practitioner
Women’s Health Nurse Practitioner

Offering more than $1 million in scholarships to DNP students each year.
Contact us at: prospectivednp@umn.edu
Visit: Nursing.umn.edu

ADDITIONAL DNP SPECIALTIES

ADVANCE YOUR NURSING CAREER WITH THE DNP DEGREE

Health Innovation and Leadership
Nursing Informatics
Post-master’s DNP

ADDITIONAL DNP SPECIALTIES
Adult Health/Gerontological
Clinical Nurse Specialist
Adult Health/Gerontological
Nurse Practitioner
Family Nurse Practitioner
Integrative Health and Healing
Nurse Anesthesia
Nurse Midwifery

PhD education helps Mayo’s CNIO launch EHR system
by Barb Schlaefer

As the chief nursing informatics officer for the Mayo Clinic enterprise, Jason Fratzke is immersed in helping lead a clinic-wide transition to a new, single electronic health record system. He says his experiences as a bedside nurse, an administrator and a PhD student at the University of Minnesota School of Nursing all contributed to his preparation for this massive project.

“We are implementing a single and converged electronic health record system for the first time, meaning we have to all move together,” he said. “When we go live, every nurse on the inpatient side will have their own dedicated smart phone. We will be able to do things we have never been able to do.”

He says the PhD program at the School of Nursing has been particularly relevant to his work at the Mayo Clinic, a world-renowned research-intensive organization with facilities in Wisconsin, Iowa, Arizona, Florida and Minnesota.

“The PhD education gives me an advantage in committees and other groups at Mayo,” he said. “I understand the vernacular, the research implications and am able to contribute to the conversation, represent nursing and lead the conversation in some cases.”

“Clinical nurses with PhDs in nursing informatics bring a rare and valuable set of perspectives and skill sets to the health care system,” said School of Nursing Dean Connie White Delaney, PhD, RN, FAAN, FACMI, who is Fratzke’s PhD adviser. “An electronic health records system can meet all government requirements, but if it’s impractical for nurses to use or generates useless information, it serves no one.”

Fratzke started his nursing career as a pediatric nurse and then became an emergency room nurse manager while he earned a master’s degree in nursing at the University of Minnesota. Now as a chief nursing informatics officer, there have been many instances, he says, when PhD coursework was directly applicable to something happening at work. “I’m living and breathing it while I’m learning. Whether it was around data vocabulary, standardization and classification of data, research methodologies — it all applies,” he said.

PhD education helps Mayo’s CNIO launch EHR system

by Barb Schlaefer

As the chief nursing informatics officer for the Mayo Clinic enterprise, Jason Fratzke is immersed in helping lead a clinic-wide transition to a new, single electronic health record system. He says his experiences as a bedside nurse, an administrator and a PhD student at the University of Minnesota School of Nursing all contributed to his preparation for this massive project.

“We are implementing a single and converged electronic health record system for the first time, meaning we have to all move together,” he said. “When we go live, every nurse on the inpatient side will have their own dedicated smart phone. We will be able to do things we have never been able to do.”

He says the PhD program at the School of Nursing has been particularly relevant to his work at the Mayo Clinic, a world-renowned research-intensive organization with facilities in Wisconsin, Iowa, Arizona, Florida and Minnesota.

“The PhD education gives me an advantage in committees and other groups at Mayo,” he said. “I understand the vernacular, the research implications and am able to contribute to the conversation, represent nursing and lead the conversation in some cases.”

“Clinical nurses with PhDs in nursing informatics bring a rare and valuable set of perspectives and skill sets to the health care system,” said School of Nursing Dean Connie White Delaney, PhD, RN, FAAN, FACMI, who is Fratzke’s PhD adviser. “An electronic health records system can meet all government requirements, but if it’s impractical for nurses to use or generates useless information, it serves no one.”

Fratzke started his nursing career as a pediatric nurse and then became an emergency room nurse manager while he earned a master’s degree in nursing at the University of Minnesota. Now as a chief nursing informatics officer, there have been many instances, he says, when PhD coursework was directly applicable to something happening at work. “I’m living and breathing it while I’m learning. Whether it was around data vocabulary, standardization and classification of data, research methodologies — it all applies,” he said.
Barriers to birth control

DNP project improves access to contraceptive implant

by Brett Stursa

As a family nurse practitioner, Martha Trevey has seen the paradigm around birth control methods shift to those that are long acting, like the contraceptive implant and intrauterine devices. But as someone who practices in homeless shelters, she saw that her patients often faced barriers accessing long-term birth control. At one Minneapolis clinic, only about 14 percent of the women who were referred to an off-site clinic to get an implant actually went on to get it.

Trevey, who’s a student in the Doctor of Nursing Practice program, wondered why. She decided to explore this health inequity as she began her scholarly project, which is an evidence-based project to advance system level change.

“I wanted to make sure that we were able to decrease the barriers to contraception for these women so they can be empowered and choose options that are good for them long-term,” said Trevey, who is employed by Hennepin Healthcare for the Homeless. Women whom she saw at the clinic were juggling many responsibilities and often struggled to find time for additional appointments. “They were really stressed and pressed for time,” said Trevey. To address these barriers, the project sought to offer women the contraceptive implant at the clinic on-site during same-day appointments. “Offering the contraception during same-day appointments was really important in meeting women where they were at and not providing any more stress,” she said.

The project required administrative paperwork, contractual agreements and policy changes. In the process, Trevey learned that the clinic wouldn’t be reimbursed for the implants if they were offered the same day, so instead the clinic created a budget for the project. “Our team was very committed to health equity and was interested in pursuing the project despite the cost,” said Trevey.

During the 12-week evaluation period, successful implant rates increased from 14 percent to 80 percent. She said she was surprised to see that when access to the implant was improved, more women desired getting one. “This suggests that when the contraceptive implant is more accessible, women are more willing to obtain this method,” said Trevey.

For her work on the project, Trevey was awarded the Sandra R. Edwardson Award for Excellence in Doctor of Nursing Practice Leadership. “She is a change agent inspired by the needs of those she serves and her passion for her work is an inspiration to those she encounters,” said Clinical Associate Professor Jeannie Pfeiffer, who was Trevey’s project adviser.

While the clinic continues to offer the same-day, on-site appointments, Trevey is working to implement additional policy changes so the clinic can be reimbursed for the implant. “Offering access to these options to women and empowering them is really important,” said Trevey.

Family nurse practitioner Martha Trevey, DNP, APRN, FNP, talks with a patient at a Hennepin Healthcare for the Homeless clinic in Minneapolis.
Rosemary Fister spent the first days of the new year studying for her board exams. After graduating in the spring of 2016 from the Doctor of Nursing Practice program, she was preparing for the psychiatric and mental health nurse practitioner exam. But her studies weren’t in a quiet library or on the couch at home. Instead, she juggled her exam preparation while volunteering with the Standing Rock Medic and Healer Council in North Dakota. “I am honored to be at Standing Rock during a historic convergence of tribal nations defending sacred sites, land sovereignty and natural land, air and water resources,” said Fister. “The Standing Rock Medic and Healer Council is dedicated to being here as people stand in resistance to the Dakota Access Pipeline and strives to be an indigenous-led and matriarchal collective.”

Initially, Fister went to Standing Rock to help with a needs assessment of infrastructure at the camp. “The population grew very quickly and they wanted someone with a public health understanding to be able to take stock of what was there and what the needs were,” said Fister. “At one point, the camps collectively had 12,000 people. So the infrastructure needs included drinking water, sanitation, toilets and having access to emergency medical response.”

While at the camp, Fister saw police use a water cannon on protesters, resulting in a mass causality incident with 300 injuries. “After seeing what I saw that night and being surprised that nobody died, I was concerned about what something like an eviction of over 10,000 people would look like and the potential for a mass causality incident that could be much worse,” she said.

So Fister stayed on, as the temperatures dipped well below zero. “We work and live out of tipis, yurts and other structures heated by wood we chop, water we carry, food we eat together,” said Fister.

Soon she took on the role of volunteer coordinator. “We have not just doctors, nurses and western providers, we also have a yurt set up specifically for midwives attending to women’s health care needs. There’s another space with herbalists, influenced greatly by one of our matriarchs from the area. Providers refer patients to one another and learn about other ways of addressing health care problems. “We come from an indigenous-centered perspective and know that medicine historically has been used sometimes violently as a tool of oppression. The way we talk about that to volunteers coming through is that we are decolonizing medicine. Part of that means working with a variety of modalities and offering options so that people have choices about the kind of care that they choose to seek.”

This integrated, integrative approach was one Fister was already comfortable with. “I am lucky to have been in the psych mental health program at the University of Minnesota because there is a big focus on integrative health and healing woven throughout that program. It is incredible to see a health care system that is coming together so organically that includes all of those different opportunities for healing.”
The numbers are well documented. About one in 10 people in the United States has a substance use disorder, which mirrors the number of nurses and other health professionals with the illness. That means about 300,000 nurses nationwide are living with a substance use disorder, and in Minnesota that translates to about 12,700 nurses.

While the numbers are straightforward, the consequences of substance use disorders on lives are complicated and nuanced. Concerned about the scope of the problem and its impact on patients and nurses’ well-being, Dean Connie White Delaney, PhD, RN, FAAN, FACMI, sought to identify strategies to address the issue of substance use disorder in nurses.

“Nobody is untouched by addiction,” said Delaney. “Even though it brings to the surface many difficult issues, it is critical to the health of our patients and nurses that we talk openly and address it.”

In 2014, Delaney invited state leaders in licensing, education and recovery, as well as the school’s largest clinical partners University of Minnesota Health and Fairview Health Services, to develop a deeper understanding of the landscape in Minnesota and identify a blueprint for action. All who were invited were quick to accept the invitation. Shirley Brekken, MS, RN, FAAN, executive director of the Minnesota Board of Nursing, was eager to get to work. “I think that each of us was looking for something, for a way to protect the public, be supportive of recovery and make nurses aware of how easily addiction can occur,” said Brekken. “There was recognition that if we do it together we can have a far greater impact than if each of us is operating on our own.”

continued on page 22

Clearing the hurdles

School leads collaborative efforts to address substance use disorders in nurses

by Brett Stursa
The group, called Prevention Awareness Addiction Recovery Reentry and Support, quickly determined that education and support were priorities. Since the first meeting in 2014, the School of Nursing developed and launched an integrated statewide approach encompassing education, prevention, recovery and support.

EDUCATING STUDENTS ON THE RISKS
A stressful job, stigma and shame about substance abuse, and a lack of education regarding self-identification all contribute to the risks nurses face. “There are a lot of risk factors that are unique to nurses that weren’t being discussed in the education that the students were getting,” said Dina Stewart, RN, a Doctor of Nursing Practice student who worked with Christine Mueller, PhD, RN, FGSA, FAAN, associate dean for academic programs, and others to develop a learning module for all pre-licensure students. “It’s largely something nurses don’t talk about still because of the stigma.”

The module, which will be made available to pre-licensure programs across Minnesota, is designed to help students understand the risk factors nurses face, with the idea that if nurses know their risks they are better equipped to avoid them. Another objective is to give emerging nurses a plan of action if a colleague exhibits symptoms. “One of my biggest hopes is that it can be discussed openly without any shame associated with it,” said Stewart.

Many nurses don’t seek help because they fear they will lose their licenses to practice. The education describes the protections in place to assist nurses and other health professionals. Minnesota offers nurses and other health professionals a confidential monitoring program. “Nurses are worried they are going to lose their livelihood when really there are protections in place to assist them if they come forward on their own,” said Stewart.

INTRODUCING PEER SUPPORT FOR NURSES IN RECOVERY
The goal is that the education being taught in the classroom will be bridged to extend to orientation and ongoing professional development in practice settings. Until recently, nurses who sought treatment and hoped to re-enter the profession had little assistance from each other. Nurses in Minnesota now have a peer support network, which works to foster peer support for nurses in recovery.

The meetings do not take the place of treatment or AA, but rather provide an opportunity for nurses to talk about their recovery and the challenges unique to nursing. “The main hurdles are stigma and shame. That’s especially true in nursing because we are dedicated to helping people and when we realize that we may have harmed people, the shame of that is overwhelming,” said Marie Manthey, RN, Nurses Peer Support Network board chair. Manthey’s own story of recovery is shared in the School of Nursing’s module.

Regular meetings of the network are held in eight cities across the state, and on any given week, there are 10 to 15 people at each meeting. Plans are underway to expand to more cities. “We would like to have meetings in every area where there are groups of nurses who would benefit from it,” said Manthey, a School of Nursing alumna.

Reflecting on the progress made and the work still to be done, Dean Delaney credits the group’s collaborative spirit and willingness to be vulnerable during difficult conversations for its successes. “What’s underlying the development of this integrated model, ultimately, is ensuring the highest trust and safety of the public and also supporting our professionals,” said Delaney. “The way to enhance the health of the public is ensuring the health of care providers, including nurses. We have the framework and we are committed to build on it.”

“Nobody is untouched by addiction. Even though it brings to the surface many difficult issues, it is critical to the health of our patients and nurses that we talk openly and address it.”
– Dean Connie White Delaney

continued from page 21

The group, called Prevention Awareness Addiction Recovery Reentry and Support, quickly determined that education and support were priorities. Since the first meeting in 2014, the School of Nursing developed and launched an integrated statewide approach encompassing education, prevention, recovery and support.

EDUCATING STUDENTS ON THE RISKS
A stressful job, stigma and shame about substance abuse, and a lack of education regarding self-identification all contribute to the risks nurses face. “There are a lot of risk factors that are unique to nurses that weren’t being discussed in the education that the students were getting,” said Dina Stewart, RN, a Doctor of Nursing Practice student who worked with Christine Mueller, PhD, RN, FGSA, FAAN, associate dean for academic programs, and others to develop a learning module for all pre-licensure students. “It’s largely something nurses don’t talk about still because of the stigma.”

The module, which will be made available to pre-licensure programs across Minnesota, is designed to help students understand the risk factors nurses face, with the idea that if nurses know their risks they are better equipped to avoid them. Another objective is to give emerging nurses a plan of action if a colleague exhibits symptoms. “One of my biggest hopes is that it can be discussed openly without any shame associated with it,” said Stewart.

Many nurses don’t seek help because they fear they will lose their licenses to practice. The education describes the protections in place to assist nurses and other health professionals. Minnesota offers nurses and other health professionals a confidential monitoring program. “Nurses are worried they are going to lose their livelihood when really there are protections in place to assist them if they come forward on their own,” said Stewart.

INTRODUCING PEER SUPPORT FOR NURSES IN RECOVERY
The goal is that the education being taught in the classroom will be bridged to extend to orientation and ongoing professional development in practice settings. Until recently, nurses who sought treatment and hoped to re-enter the profession had little assistance from each other. Nurses in Minnesota now have a peer support network, which works to foster peer support for nurses in recovery.

The meetings do not take the place of treatment or AA, but rather provide an opportunity for nurses to talk about their recovery and the challenges unique to nursing. “The main hurdles are stigma and shame. That’s especially true in nursing because we are dedicated to helping people and when we realize that we may have harmed people, the shame of that is overwhelming,” said Marie Manthey, RN, Nurses Peer Support Network board chair. Manthey’s own story of recovery is shared in the School of Nursing’s module.

Regular meetings of the network are held in eight cities across the state, and on any given week, there are 10 to 15 people at each meeting. Plans are underway to expand to more cities. “We would like to have meetings in every area where there are groups of nurses who would benefit from it,” said Manthey, a School of Nursing alumna.

Reflecting on the progress made and the work still to be done, Dean Delaney credits the group’s collaborative spirit and willingness to be vulnerable during difficult conversations for its successes. “What’s underlying the development of this integrated model, ultimately, is ensuring the highest trust and safety of the public and also supporting our professionals,” said Delaney. “The way to enhance the health of the public is ensuring the health of care providers, including nurses. We have the framework and we are committed to build on it.”

“Nobody is untouched by addiction. Even though it brings to the surface many difficult issues, it is critical to the health of our patients and nurses that we talk openly and address it.”
– Dean Connie White Delaney

continued from page 21
From nurse innovator to entrepreneur

Second-annual conference draws more than 100 innovators

Planting Seeds of Innovation, a workshop hosted by the School of Nursing for health care professionals who are interested in taking innovations to market, attracted more than 100 participants in December. That’s up from the 30 people who attended last year’s conference. Here, participants brainstorm ideas to improve patient care. Several hundred innovative ideas came out of the session. In addition to brainstorming product and service ideas for improving patient care, participants learned about legal and business processes, including product design, prototyping, intellectual property, commercialization and financing. Partners included the University of Minnesota College of Design, Katharine J. Densford International Center for Nursing Leadership, University of Minnesota Medical Devices Center and University of Minnesota Physicians.
A lifetime commitment to adolescent nursing

The Society for Adolescent Health and Medicine presented Linda Bearinger, PhD ’91, RN, FAAN, FSAHM, with the prestigious Outstanding Achievement in Adolescent Health and Medicine Award. This award recognizes individuals for their commitment to improving health and health care for young people.

Bearinger, who began her work at the School of Nursing in 1991 and retired in 2016, dedicated her career to improving adolescent health and promoting excellence among those who care for adolescents. Early achievements in her tenure included the development of graduate and post-graduate training in adolescent health, through an interdisciplinary education program. Funded through the U.S. Maternal and Child Health Bureau, this program prepares professionals from disciplines of medicine, nursing, nutrition, psychology and social work for specialized/educator/scholar roles in adolescent health.

Credited with coining the specialty of adolescent nursing in tandem with funding of the Center for Adolescent Nursing by MCHB, Bearinger is also considered a pioneer in leadership training in adolescent nursing. During her career, Bearinger received 10 federal training grants in adolescent nursing. During her career, Bearinger received 10 federal training grants in adolescent health and adolescent nursing, which provided specialized training for students and trainees.

Bearinger herself made substantial contributions to adolescent health through her service in leadership positions. She served on expert panels for organizations including the American Academy of Nursing, the Institute of Medicine and MCHB. She served as president of the International Association for Adolescent Health from 2009-2013, where she excelled in supporting regional organizations, promoting global collaborations and advocating for adolescents around the world.

Perhaps Bearinger’s most notable contribution to the field is her commitment to innovations in teaching. She is the only invited North American representative to the European Union and Education in Adolescent Care and Health (EuEACH), a multidisciplinary network of trainers. Bearinger’s guidance transformed traditional lecture methods into a rich variety of teaching/learning strategies including role-play, experiential interactive methodologies and participatory strategies adapted from her consultative work with the World Health Organization.

Similarly, the annual Minnesota Summer Institute in Adolescent Health, begun by Bearinger and Professor Renee Sewing in 1995, is widely recognized for its use of innovative pedagogical methods. Through this institute, participants expand both adolescent health content expertise and a repertoire of teaching/learning strategies. Most telling of Bearinger’s excellence as an educator is her mentoring of students. She has advised students and fellows who have moved into academic and scholarly positions throughout the U.S. as well as in Canada, Ghana, New Zealand, Portugal, Spain and Switzerland. Advises’ scholarship and professional activity, including active programs of research, expertise in pedagogy, publications and advocacy, is clear evidence of Bearinger’s mentoring. Acknowledging her outstanding contributions to education in the field of adolescent health, in 2010 the University of Minnesota named Bearinger a Distinguished Teaching Professor.

Recognized by this outstanding professional achievement award, Bearinger’s 32-year career demonstrates excellence in improving the health and well-being of adolescents, and is inspiring and motivating those who work on behalf of young people around the world.
Big data advances public health nursing

The Center for Nursing Informatics has advanced the national road map for comparable and sharable data to build big data resources. Center Director Bonnie Westra’s work with national partners in electronic health record development as well as home health data are potent examples. Additionally, the center is home to the international practice-based research network, The Omaha System Partnership for Knowledge Discovery and Health Care Quality. Researchers and community partners from more than 15 countries leverage the power of nursing’s data to generate new knowledge in support of practice and to improve population health. This year at the American Public Health Association Annual Meeting the Omaha System Partnership showcased five public health nursing and big data presentations, many of which were authored by center faculty and students, whose names are identified in bold.

- Leaders in Big Data Research (Monsen & Martin) provided an exemplar using large datasets to examine social and behavioral determinants of health associated with public health nursing outcomes.
- Visualizing Population Patterns in Older Adults (Rajakrishnan, Monsen & Moon) visually analyzed associations between patient characteristics of age, gender, co-morbidity burden and home health length of stay with health-related outcomes of older adult home health population.
- Data Mining for Translation to Practice (McNaughton, Porta, Mathiason, Chi, Brandt & Porta) identified patterns of public health nursing home visiting interventions associated with improved mental health for Latina mothers receiving family home visiting services.
- Evaluating Public Health Nurses Impact on Nutrition Outcomes (Halling, Lia, Thorson & Monsen) demonstrated public health nursing’s role in promoting healthful nutrition and related client improvement.

- Emerging Geospatial Methods (Kerr, Hong, Gao & Kryzanowski) described using big data with emerging geospatial and computational models within geographic information science for population health assessments.
- Associate Professor Karen Monsen, who directs the partnership, received the 2016 Lillian Wald Service Award from the Public Health Nursing Section of American Public Health Association in recognition of her work advancing public health nursing big data research.

The Omaha System International Conference will be held April 20-22, in Eagan, Minnesota. Find more information at www.omahasystem.org. The Nursing Knowledge: Big Data Science Conference will be held June 7-9 in Minneapolis. Visit http://2.umn.edu/bigdata for more information.

School nurses integral to chronic conditions care

by Camille Brown

Children in the United States spend significantly more time in schools than in clinical or hospital settings. In public schools, families entrust management of their child’s health care needs to the specialized nursing care provided by licensed school nurses. School nurses are especially key in the education and care of children with special health care needs.

In Minnesota, the School Nurse Organization of Minnesota strives to promote and advance the excellence of school nursing practice. SNOM and the Center for Children with Special Health Care Needs have a history of partnership. Recently, such a partnership among center faculty Ann Garwick and Wendy Looman, SNOM leaders Mary Balinski Heiman, MS ’05, BSN ’07, and Denise Hermann, DNP ’07, MS ’96, and PhD student Camille Brown resulted in the International School Nurse Asthma and Attention-Deficit/Hyperactivity Disorder Project (I-SNAAP). I-SNAAP surveyed 203 school nurses in Minnesota and Iceland to explore practice, attitudes and beliefs related to the roles of nurses and families in the care of students with asthma and ADHD.

Advanced education was associated with higher school nurse assessment of their confidence, skill and knowledge in using a family systems approach to caring for children with asthma and ADHD and in involving families in nursing care planning. Findings from this study support continued collaboration between Minnesota school nurses and the University of Minnesota School of Nursing. SNOM leadership was particularly essential in promoting the survey to Minnesota school nurses. Initial findings were presented by Brown to attendees at the annual SNOM conference in November 2016. Findings from this study will help guide future research and provide evidence supporting the role of school nurse as integral to health care teams for children with chronic conditions.

Can Fitbits help students establish healthy habits?

Ten University of Minnesota nursing students rang in the New Year with Fitbits on their wrists for a wearable technology study, led by Associate Professor Carolyn Porta, PhD, MPH, RN, SANE-A, with collaborators Clinical Assistant Professor Barb Pettersen, PhD, APRN, PMHCNS-BC, School of Nursing; Boynton Health Research Director Katie Lust, PhD, MPH, RD; Associate Professor Marla Eisenberg, ScD, MPH, Department of Pediatrics; and Glen Morris, undergraduate research assistant. The students are wearing the devices for three months, tracking their steps, activity intensity, sleep and calories burned. They have access to their personal data in real time, and Porta is gathering pilot data to inform a larger health promotion study, including important information about students’ compliance.

While anyone could benefit from health information collected with a wearable device, college students are at a critical point in life in understanding themselves and establishing healthy behaviors. College students are often sleep deprived and report experiencing high levels of stress. Awareness of their physiological patterns could yield purposeful behavior change to improve their well-being or increase help-seeking behaviors. Thus far, one participant said she is paying more attention to when her heart rate is higher than she wants it to be. Another participant was positively surprised by how quickly she falls asleep at night and how many steps she takes during a regular work shift.

National insurance companies have explored providing wearable devices to members because simple personalized health information might result in more preventive behaviors, fewer hospital visits and reduced health care costs. New Year’s resolutions, or not, those nursing students continue to wear their Fitbits, day and night.
SCHOOL NEWS

SCHOOL NEWS

SCHOOL NEWS

BIREFILY

MNRS comes to Minneapolis

The School of Nursing is the primary host of the 2017 Midwest Nursing Research Society research conference. The conference, which is April 6-9, will be held in Minneapolis. The theme of the conference is Harnessing Big Data and Nursing Science to Improve Health. The co-host schools are North Dakota State University, South Dakota State University, University of Iowa, University of Nebraska Medical Center College of Nursing, University of North Dakota College of Nursing and Professional Disciplines, and the University of South Dakota and the Minnesota Association of Colleges of Nursing.

Big data nursing book coming in June

Dean Connie White Delaney, PhD, RN, FAAN, FACM, and Clinical Professor Tom Clancy, PhD, MBA, RN, FAAN, are editors of Big Data-Enabled Nursing, which will be published by Springer Publishing in June. Other editors are Charlotte Weaver, PhD, RN, FAAN, Judith Warren, PhD, RN, FAAN, FACMI, and Ray Simpson, DNP, RN, FAAN.

Wyman co-edits urology book

Professor Jean Wyman, PhD, APRN, GNP-BC, FAAN, FGSA, co-edited Core Curriculum for Urologic Nursing with Diane Kaschak Newman, DNP, ANP-BC, FAAN, BCB-PMD, and Valena Welch, MSN, CPNP. The book was published by the Society of Urologic Nurses and Associates in November 2016.

Grants fund travel to build international relationships

Faculty were awarded University grants to assist in building international relationships. Grant funding comes from the Global Programs and Strategy Alliance and the AHC Center for Global Health and Social Responsibility.

- Professor Christine Mueller, PhD, RN, FGSA, FAAN, and Clinical Associate Professor Carol Flaten, DNP, RN, will explore the feasibility of a study abroad option for senior Bachelor of Science in Nursing students at the University of Limerick in Ireland. They will be working with the faculty from the University of Limerick Department of Nursing and Midwifery to learn about their curriculum, practicum experiences and learning options for students.

- Clinical Associate Professor Melissa Saftner, PhD, APRN, CNM, and Associate Professor Barb McMorris, PhD, will be collecting data about adolescent risk behaviors in four rural fishing villages in Uganda. Saftner will also explore clinical practicum study abroad opportunities for DNP and MN students in women’s health settings in Uganda.

- Clinical Associate Professor Mary Benbenek, PhD, APRN, FNP-BC, CNP, will use the award to develop a study abroad option for DNP students in Guatemala.

- Associate Professor Carolyn Porta, PhD, MPH, RN, will travel to Chiang Mai University in Thailand to build new relationships to advance research collaborations.

School hosts scholar from China

Qiaoxun Wan, an associate professor from Peking University Nursing School, is a visiting scholar from China. Associate Professor Fang Yu, PhD, RN, GNP-BC, FAAN, FGSA, is her faculty sponsor. Wan’s research focuses on enhancing self-care behaviors and exercise intervention among community-dwelling older adults with chronic diseases, nursing staffing related to job satisfaction, work environment and organizational behaviors, as well as long-term care for older adults.

Redesigning maternity care

Professor Melissa Avery, PhD, APRN, CNM, FACN, FAAN, will co-lead a nation-leading initiative, called Maternity Care Education and Practice Redesign, funded by the Josh and Macy Jr. Foundation. This three-year initiative will develop a joint curriculum for nurse-midwife graduate students and obstetrical medical residents at four pilot sites. John Jennings, MD, of Texas Tech University and the American College of Obstetricians and Gynecologists immediate past president, will co-lead this project.

Robertson leads East Africa research team

A team of University researchers with expertise in animal health, nursing, agronomy, plant genetics, public health and environmental ecosystems will partner with colleagues in East Africa to explore the complex and interrelated threats brought by dramatic climate changes in the arid regions of East Africa. Associate Professor Cheryl Robertson, PhD, MPH, RN, and Dominic Travis, DVM, from the College of Veterinary Medicine, will lead the first phase of this project, funded by $96,000 from the University of Minnesota’s new Grand Challenge Grant program. The grant is one of 29 such grants awarded this year to jumpstart new research collaborations across the University that could grow into broad discoveries that address the most pressing problems facing Minnesota and the world.

AACN honors Disch with leadership award

The American Association of Colleges in Nursing awarded faculty ad honorem Jeanne Disch, PhD, RN, the Geraldine “Polly” Bednash Lectureship Award. The AACN Board of Directors chooses recipients on the basis of their leadership and scholarly contributions to interprofessional education. The board noted Disch’s accomplishments related to AACN’s Quality and Safety for Nursing Education (QSEN).

AWARDS AND HONORS

Professor Donna Bliss, PhD, RN, FAAN, FGSA, has been appointed editor of the incontinence Codrane Review Group. She also was selected to join the 2017 cohort of Friends of the National Institute of Nursing Research Ambassadors.

Dean Connie White Delaney, PhD, RN, FAAN, FACMI, was elected president-elect of the Women’s Health Leadership Trust, a professional network of more than 320 executive women in health care, founded in the Twin Cities.

Clinical Associate Professor Diana Drake, DNP, APRN, WHNP-BC, was appointed to policy chair of the National Association of Nurse Practitioners in Women’s Health.

Associate Professor Nilofar Hadidi, PhD, APRN, ACNBS-BC, FAHA, was awarded the 2017 Excellence in Neuroscience Nursing Education Award by the American Association of Neuroscience Nurses.

Professor Christine Mueller, PhD, RN, FGSA, FAAN, was named one of the 30 distinguished alumni for the 30th anniversary of Old Dominion University College of Health Sciences.

Clinical Associate Professor Melissa Saftner, PhD, APRN, CNM, will serve as chair of the State of Minnesota Board of Nursing’s APRN advisory committee.

Associate Professor Kristine Talley, PhD, APRN, GNP-BC, received the Edna Stilwell Writing Award from the Journal of Gerontological Nursing for the article Reliability and Validity of Two Measures of Toileting Skills in Frail Older Women Without Dementia, which was published in September 2016.

Clinical Associate Professor Kathryn White, DNP, APRN, CRNA, FAAN, received the 2016 Lifetime Achievement Award from the Minnesota Association of Nurse Anesthetists. She also was re-appointed to the State of Minnesota Board of Nursing’s APRN advisory committee.

The American Nurses Association appointed Clinical Assistant Professor Eileen Weber, DNP, JD, RN, PHN, to the Center for Ethics and Human Rights Advisory Board.

Clinical Assistant Professor Dianne Willer-Sly, DNP, APRN, FNP-BC, was elected for a second two-year term as president of the Minnesota Nurse Practitioners Association.
NEW APPOINTMENTS

Neeta Adhikari joined the school as a research professional working with Assistant Professor Ryan Mays, PhD, MPH, to study the impact of a walking exercise program on the health of patients with peripheral artery disease. Adhikari has worked at the University of Minnesota for more than 15 years as a research associate. She earned a bachelor’s, master’s and PhD degree from Guru Nanak Dev University in India.

Ane Emery joined the school as a research coordinator for the Families and Long Term Care projects that are led by Professor Joe Gaugler, PhD. She earned a bachelor’s degree in genetics, cell biology and development from the University of Minnesota and a master’s degree from the School of Dentistry. Previously, Emery was a data coordinator for two Department of Labor grants at Century College and a research assistant and lab manager at the University of Minnesota.

Christina Flowers joined the school as an operational administrator in the Office of the Dean. Most recently Flowers served as a clinical coordinator and administrative specialist for the pediatrics department at the University of Minnesota Medical School. She earned a bachelor’s degree in criminal justice studies and a master’s degree in management and nonprofit administration, both from Metropolitan State University.

Alexis Forsberg, DNP, APRN, FNP, joined the school as a clinical assistant professor. Forsberg earned a bachelor’s degree at the University of Minnesota School of Nursing, a master’s degree at Gonzaga University School of Nursing and Human Physiology in Spokane, Washington and a Doctor of Nursing Practice degree at the College of Saint Scholastica. She is a family nurse practitioner, providing specialty care in endocrinology at the HealthPartners Specialty Human Physiology in Spokane, Washington.

SCHOOL NEWS

Lois Gildea joined the school as a professor of nursing and director of the PhD Program in Nursing. She earned a PhD from the University of Minnesota School of Nursing, a master’s degree from Villanova University and a certificate in health coaching.

George Saksal joined the school as the coordinator of doctoral recruitment and admissions in the Office of Student and Career Advancement Services. Previously, he served as the student services specialist in the Academic Health Center’s Health Career Center and as the project lead for the CLARION National Case Competition. He earned a bachelor’s degree in psychology from the University of Minnesota.

Tamara Stats joined the school as a research assistant for the Families and Long Term Care Projects, led by Professor Joe Gaugler, PhD. Stats is counseling families who have a family member moving into Long Term Care for dementia. She earned a bachelor’s degree in psychology from Hamline University and a master’s degree in marriage and family therapy from St. Mary’s University.

Amanda Weinstein joined the school as a research coordinator for the Families and Long Term Care projects, led by Professor Joe Gaugler, PhD. Weinstein earned a bachelor’s degree and a master’s degree from Tuana University.

Emily Yund joined the school as a research assistant in the Office of Nursing Research and Scholarship. She earned a bachelor’s degree in social work from Saint Catherine University and previously was employed at Pinnacle Services, where she was a case manager.

EXTERNAL FACULTY GRANTS

Bearinger, Linda 
MN Knowledge to Practice in Adolescent Health (MN-KAPAN) (T21) 
Health Resources and Services Administration

Bliss, Donna 
Skin pH Modulation through Curled Fiber in Incontinence Briefs 
Hartmann USA, Inc.

Cheung, Carjena 
Effects of Yoga on Oxidative Stress in Parkinson’s MidWest Nursing Research Society

Chi, Chih-Lin 
Predictive Optimal Anticoagulant Treatment for Segregated Patient Populations (R01) 
Harvard University / National Institutes of Health

Fulkerson, Jayne 
New Ulm at HOME (NU-HOME) (R01) 
National Heart, Lung, and Blood Institute / National Institutes of Health

Fulkerson, Jayne 
Jonas Nurse Scholar Program 2016-2018 
Jonas Center

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

Fulkerson, Jayne 
Parents and Kids Prevent Diabetes 
University of Minnesota Foundation / Olafson Trust

Fulkerson, Jayne 
Future of Nursing Scholars 
Robert Wood Johnson Foundation

Fulkerson, Jayne 
School Nurse-directed Secondary Obesity Prevention for Elementary School Children (R01) 
Temple University / National Institutes of Health

Fulkerson, Jayne 
Virtual Role Plays to Reduce the Occurrence of Childhood Obesity (Phase II) 
SIMmersion, LLC / National Institutes of Health

Gaugler, Joseph 
Minnesota Memory Care Management Center Minneapolis Board on Aging / State of Minnesota

Gaugler, Joseph 
Improving Outcomes for Family Caregivers and Older Adults with Complex Conditions: The Adult Day Service Plus Program (R01) 
National Institute on Aging / National Institutes of Health

Gaugler, Joseph 
Comparative Effectiveness of Dementia Caregiver Interventions: Towards a Person-Centered Care Planning Tool (K18) 
Agency for Healthcare Research and Quality

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 
The Residential Care Transition Module (R51) 
National Cancer Institute / National Institutes of Health

Gaugler, Joseph 
A Proactive Health Monitoring Intervention for Dementia Caregivers: The eNeighbor (K18) 
Agency for Healthcare Research and Quality

Gaugler, Joseph 
Social Support Aid for People with Dementia (SBIR) 
American Medical Electronics Corporation / National Institutes of Health

Hooke, Casey 
KAM Kids are Moving: An Exercise Program for Children with Cancer 
Alka’s Lemonade Stand Foundation

Hooke, Casey 
Children Completing Treatment for Leukemia: How Does it Relate to Other Symptoms 
University of Minnesota / Olafson Trust

Hooke, Casey 
Phenotypic and Genotypic Associations with Symptom Clusters During Childhood Leukemia Treatment (R01) 
Duke University / National Institutes of Health

Kaas, Merrie 
Enhancing PMHNP & FNP DNP student Readiness to Provide Integrated Care to Persons with Mental Illness and Complex Medical Needs Who are Typically Underserved in Urban and Rural Communities 
Health Resources and Services Administration

Kaas, Merrie 
Enmeshing 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

Mays, Ryan 
A Community-based Exercise Program to Improve Walking Outcomes in Patients with Peripheral Artery Disease (R01) 
National Heart, Lung, and Blood Institute / National Institutes of Health

McKechnie, Anne 
Preparing Heart and Mind: A Mobile and Web Application for Expectant Parents and Health Care Providers After Fetal Heart Disease Diagnosis 
UMN: MN-bioU / National Heart, Lung, and Blood Institute / National Institutes of Health

McMahon, Stobhan 
SHIFT the Balance 
Minnesota Board on Aging / State of Minnesota

McMahon, Stobhan 
STRIDE - Randomized Trial of a Multifactorial Fall Injury Prevention Strategy 
Brigham & Women’s Hospital / National Institute on Aging / National Institutes of Health & PCORI

SCHOOL NEWS
is for Feeling Better Already.

Nurse Practitioners Clinic 3rd St. & Chicago, Minneapolis

McMorris, Barbara
Partnering for Healthy Student Outcomes Healthy Youth Development/Prevention Research Center Center for Disease Control and Prevention

Mueller, Christine
Home and Community Based Service Performance-based Incentive Payment Program MN Department of Human Services / State of Minnesota

Schoenbaum, Elizabeth
SCHOOL NEWS SCHOOL NEWS

McKenn, Christine
SCHOOL NEWS SCHOOL NEWS

Schoenbaum, Elizabeth
SCHOOL NEWS SCHOOL NEWS


A whirlwind of learning experiences

Jeff Aday, a MN ’15 grad, finds the right fit in a two-nurse hospital

by Brett Stursa

After earning a degree in biology from the University of Minnesota Morris, Jeff Aday went on to pursue a Master of Nursing degree at the University of Minnesota Twin Cities. The MN program at the School of Nursing is an accelerated 16-month program for students with a non-nursing degree who want to enter the nursing profession. After earning his MN degree, he accepted his first position as a registered nurse at a 15-bed hospital in the rural community of Graceville, Minnesota. We asked him how providing health care in a rural community differs from his urban clinical experiences, how his education at the School of Nursing prepared him for this role and how he copes with the stressors that can come from being a nurse.

Q: Was it difficult finding your first nursing job?
Finding my first opportunity as a nurse was both as simple and complicated as I’d heard from mentors and professors. Jobs seem to exist at many different types of facilities, but finding a good fit where I could best develop my nursing skills required a bit of time. I didn’t want my first opportunity as a nurse to turn into a situation where I viewed the work I did as a job rather than a chance to advance in this field.

Q: What’s your first nursing position like?
I currently work at Essentia Health-Holy Trinity Hospital in Graceville, which provides health care to the town and surrounding communities in this rural area of Minnesota. It has been a whirlwind of learning experiences. I love not knowing who is going to come for services and how my abilities to give good care to those who need it match up with the needs presented.

Q: How is providing care in a rural community different than your clinical placements in the city or suburbs?
There are only two nurses in the entire facility (an RN with another RN or LPN). This appealed to me because it meant that I am able to develop in the entire spectrum of nursing instead of developing in only one specific area. While my clinical nursing skills have been developing, my ability to think on my feet has grown leaps and bounds, as my facility manages inpatient, outpatient, emergency department and surgical patients. This sounds like an overwhelming variety, but being in a small town and in a critical access hospital, the number of patients is usually manageable. Based on my experience in this hospital, I would say the health care needs are not vastly different than what I had experienced during school, but some services that are available in a metropolitan area are at times two-three hours of transport away or only available during certain days of the week or month.

Q: What do you do to take care of yourself?
I have several friends who work in EMS, which is where I also gained my initial experience in health care. I rely on these people to help debrief about situations that arise during an emergency, a strategy that has served us well in past situations. Artwork also has a hand in destressing; I dabble in drawing still life in charcoal. I find it one of the most frustrating and satisfying things to put my mind at ease and shift focus from the intensity of emergency care. I also rely heavily on my American Indian roots—I am member of the San Carlos Apache Tribe—to keep me at equilibrium via song and prayer, which I learned while growing up in Arizona.

Q: How has your education at the School of Nursing prepared you to be a nurse?
The most valuable aspect that was emphasized was the theoretical knowledge and approach to the profession of nursing. Understanding why the type of care is being performed before knowing the how has enabled me to have a better grasp on the ebb and flow of health care in general as well as nursing.
2016

NURSING ALUMNI SOCIETY BOARD

Eunice Areba, PhD ’14
Faculty, University of Minnesota School of Nursing
Marilyn Bach, MSN ’95, BSN ’74
Consultant, University of Minnesota Medical Center
Anya Butzer, BSN student
BSN Student Representative
Emma Butzer, BSN ’14
Boyton Health and Abbott Northwestern Hospital
Jean A. Carraber, DNP ’16, MSN ’03, BSN ’95, BS ’91
Secretary
Nursing Professional Practice Leader, Fairview Health System
Debra Cathcart, DNP ’14, MS ’83
Past-President
Chief Nurse Executive, University of Minnesota and Fairview Health Services
Connie White Delaney, PhD
Dean, University of Minnesota School of Nursing
Erin Strong Elliott
UMA Representative
Maureen Fuchs, BSN ’92
Minnesota Department of Health
Yumi Izumi, MSN ’16
Children’s Hospital Minneapolis
Kristin Jones, BSN ’11
Nurse Manager, University of Minnesota Masonic Children’s Hospital
Susan Lampe, MSN ’77
Retired Assistant Professor, Minnesota State University Mankato
School of Nursing
Shanda Demorest Lembeck, BSN ’13
Abbott Northwestern Hospital
Karen MacDonald, MSN ’87, BSN ’72
President-Elect
Health care and leadership consultant
Marie Manthey, PhD (hon. ’99), MNA ’64, BSN ’62, President Emeritus, Creative HealthCare Management
Barbara Mullikin, MS, BSDH ’78
Associate Development Officer, University of Minnesota School of Nursing
Marjorie Page, PhD ’09, MSN ’95, BSN ’93
Dan Pesut, PhD
Faculty, University of Minnesota School of Nursing
Amy Priddy, MSN ’03, BSN ’86
Park Nicollet
Sheryl Ramstad, MN ’13, BAP ’72, BASW ’67
Regions Hospital, Health Counseling Services
Alice Sanders, MS ’09, BSN ’05
President
Manager, Medica
Wendy Sharpe, BSN ’83
United Health Group Inc
Marc Skjernevem, MS
Director, Office of Student & Career Advancement Services, University of Minnesota School of Nursing
Shane Stamschror, MN ’13, MA ’08
Abbott Northwestern Hospital
Meagan Thompson, MN ’15
University of Minnesota Clinics
Stephanie Tismer, BSN ’86
Infection Preventionist, Healthcare Management Solutions
Julie Vanderboom, MSN ’88
Analyst, Medica

CLASS NOTES

Caroline Bunker Rosdahl, MA ’68, BSN ’60, was included in the International Nurses Association’s publication Worldwide Leaders in Healthcare. She is the author of the Textbook of Basic Nursing, now in its 11th (50th Anniversary) edition.

Marie Manthey, PhD (hon.) ’99, MNA ’62, BSN ’62, FAAN, RNCR, was awarded the 2016 American Journal of Nursing’s Book of the Year Award in Nursing under the category of Nursing Management and Leadership. The book, Primary Nursing: Person-Centered Care Delivery System Design, by Susan Wessel and Manthey, describes a model of care delivery that provides the highest possible level of person centered care for patients.

Marsha Lewis, PhD ’92, MS ’77, professor and dean of the University at Buffalo School of Nursing, will receive a Lifetime Achievement Award from the University of Wisconsin-Oshkosh College of Nursing, where she earned a Bachelor of Science in Nursing degree.

Eileen Kern, BSN ’95, supervisor of health services for Bloomington School District, was named the 2016 School Nurse Administrator of the Year by the School Nurse Organization of Minnesota. Employed at Bloomington Public Schools for 11 years, she supervises team of 35 health associates and licensed school nurses. Within the district, she has been a leader in technology. She is currently piloting an iPad application for PCA care plan documentation.

Edward S. Thompson, PhD ’97, received the 37th Annual Helen Lamb Outstanding Educator Award during the American Association of Nurse Anesthetists Annual Congress. The award, established in 1980, is presented to a CRNA who has made a significant contribution to the education of nurse anesthetists.

Roxanne Struthers, PhD ’99, former School of Nursing faculty who died in 2005, will be recognized by the National Alaska Native American Indian Nurses Association. She is serving president of the National Alaska Native American Indian Nurses Association for her contributions to nursing education for American Indian Nurses Association Annual Congress. The award, established in 1980, is presented to a CRNA who has made a significant contribution to the education of nurse anesthetists.

Misty Willie-Condiff, PhD ’09, is serving as president of the National Alaska Native American Indian Nurses Association. She is an assistant professor at Bemidji State University.

Jon Wohlhuter, MS ’10, was elected incoming president of the Minnesota Association of Nurse Anesthetists.

Angela Madeira, MN ’14, was named a National Health Service Corps Scholar. Madeira is enrolled in the Doctor of Nursing Practice program. She received a $90,000 scholarship and will serve one to two years at an NHSC-approved site in a high-need rural, urban or frontier community after graduating.

Tony Narr, DNP ’15, is serving as chair of the Policy and Advocacy Committee of the Minnesota Organization of Leaders in Nursing.

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.

IN MEMORY

Karen Arndt, DNP ’15
Kathy Orth, MS ’84
Lorna M Wiens, BSN ’69
Rosie Acton, MS ’69
Phyllis Ledin Dahl, BSN ’63
Rose Amos, MS ’69
Lorna M Wiers, BSN ’69
Barbara Nordberg, BSN ’75, MS ’79
Kathy Orth, MS ’84
Carol Brown, PhD ’03
Karen Arndt, DNP ’15
Walking a little farther each day

We all know that health care is constantly changing and evolving. We also know that nursing plays a critical role in health care and the School of Nursing is in a strong position to lead its transformation.

Over the last several months, I have had been in conversation with alums and friends of the School of Nursing in Minnesota and other parts of the country. While they sense that the health care crisis is real, they also have great confidence in the vision and leadership of our school. They are concerned that we have an aging population with increasingly complex conditions, an expanding menu of costly and invasive interventions, and disparities in health care access and quality that are driving costs up and quality down. However they have also shared that the School of Nursing has positioned itself to systematically address these challenges to health care. Even more, they know that no other school is as well positioned to prepare leaders, discover new knowledge and partner with communities to improve health locally, nationally and globally.

Let me share a few quotes from some people who, like you, are passionate about our mission:

“The school has looked outward to the community, nation and internationally to see where the needs are—both current and future—to determine what role it can play in creating a better world.” Barb Bally, MSN ’79

“The U of M does an outstanding job of preparing nurses. We could hire all their nursing graduates each year. Nurses with more education tend to ask ‘Why are we doing it this way?’ and ‘How can we do this more efficiently and effectively?’ These are the nurses we want to hire. They want to get involved in improving the patient experience, quality and outcomes.” Travis Maher, MSM, BSN, RN, chief nursing officer at Abbott Northwestern Hospital

At the end of the day, our mission is all about serving people through our faculty, staff and students. One of those people is Joyce Meyer from Cyrus, Minnesota, who lives with a disease that the School of Nursing has helped her understand and treat. Joyce is a participant in the School of Nursing’s effort to partner with health centers in greater Minnesota to improve outcomes for patients with peripheral artery disease, which affects one in five Americans over the age of 70 and makes it painful to walk. Joyce has learned a lot from the school and is doing her part to improve her health. Because of the vision and leadership of our School of Nursing and the students, staff, faculty and research that we produce, she can say, “I’m now able to walk a little farther each day.” There are so many ways to measure the impact of our school’s vision and leadership. Helping Joyce improve her health and live independently is one that we can take pride in!

John Kilbride
Director of Development
kilbride@umn.edu

An eye on improving access

Benton Scholarship instrumental in making a DNP degree possible

by Brett Stursa

As a pre-licensure nursing student, Logan Becker had the opportunity to learn from multiple nurse anesthetists. “I definitely found my calling after those experiences,” said Becker. When he graduated from Gustavus Adolphus College with a bachelor’s degree in nursing, he knew he wanted ICU experience before pursuing his CRNA goals. So he accepted positions in ICUs in Mason City, Iowa, and Minneapolis.

Becker hoped to attend the University of Minnesota’s Doctor of Nursing Practice program in nurse anesthesia because of its clinical relationship with the Minneapolis VA and other health care systems, the emphasis it places on gaining clinical experience in rural, CRNA-only anesthesia practices, and the resources that a large university can provide. “Among the schools I applied to, the University of Minnesota was my clear favorite so I was thrilled to be offered admission and quickly accepted,” said Becker. “I am truly honored to have had the opportunity to continue my studies at the University of Minnesota.”

Becker received more good news when he learned he received a Benton Scholarship for $20,000 over the course of his DNP education. “I was ecstatic,” said Becker. “The financial assistance that the Benton Scholarship has provided me over the course of my studies allowed me to focus on my studies and clinical training while taking away some of the stress that comes with paying for graduate school. When the clinical hours in our program started to increase and I was unable to continue working in the ICU, these funds were instrumental in helping make that transition more manageable.”

Becker is already thinking about post-graduation and is eager to improve access to health care. “Growing up in rural Minnesota, I have seen some of these access issues first hand as they have impacted my friends and family members,” said Becker. “By providing anesthesia services to patients in rural or underserved areas, I feel I could help to decrease the existing gap in health care access while serving communities similar to my hometown.”

Logan Becker, who will graduate in August.

SCHOOL OF NURSING FOUNDATION BOARD OF TRUSTEES

SPRING 2017

Dawn Bazarko, DNP, MPH, RN, FAAN
Secretary
Senior Vice President, Center for Nursing Advancement, United Health Group

Mary Broderick, PhD, Past Chair
Catholic Elder Care, Retired

Connie White Delaney, PhD, RN, FAAN, FAcM
Professor and Dean, School of Nursing

Susan Forstrom, MSN, Treasurer
Consultant, Creative Health Care Management

Ann Garwick, PhD, RN, LMFT, LP, FAAN
Senior Executive Associate Dean for Research, School of Nursing

Cynthia Jurgensen, MSN, RN
Clinical Review Director, United Health Care

John Kilbride, MA
Director of Development, School of Nursing

Mary Nyquist Koons, BSN
June Lapidus, MSN, CS, Chair
Southdale Psychology Associates, Retired

Patricia Kane, MSN, BSN
Carol Kelsey, BSN

Carol Jorgensen, MSN, RN
Clinical Review Director, United Health Care

John Reiling
Principal, Lifeline to Healthcare Quality

Jack Spillane
Board Chair, National Purity Soap

Kathleen Ziegler, DHA, MSA, IBSN, FACHE

Principal, Lifeline to Healthcare Quality

Susan Lampe, MSN, Nursing Alumni Society Liaison

Trustee Emeritae

Sandra J. Anderson
Mary Lou Christensen, MPH, BSN
Patricia Kane, MSN, BA
Carol Kelsey, BSN

Marilee Miller, PhD Ed. Admin.
Carolyn I. Schroeder, BSN
The Dean’s Scholarship Reception brought together more than 330 grateful students and generous benefactors at McNamara Alumni Center in October.

Doctor of Nursing Practice students traveled to Salvador, Brazil, for a women’s health practicum in January. Students shadowed local public health agents in communities in Salvador and nearby islands.

Brig. Gen. Clara Adams-Ender, School of Nursing class of 1969, led the University of Minnesota’s 2016 Homecoming Parade as grand marshal.

Students in the National Student Nurses Association hosted Paws for a Cause 5K in November, which raised $2,000 for the Pet Away Worry and Stress program.

The newest inductees to Sigma Theta Tau, Zeta Chapter were honored during a November ceremony.

The School of Nursing celebrated fall commencement Dec. 16, with Master of Nursing, Doctor of Nursing Practice and PhD students graduating. From left, David Wrobleski, Zachary Haag and Evan Beranek celebrate their graduation from the MN program.

The newest inductees to Sigma Theta Tau, Zeta Chapter were honored during a November ceremony.

The School of Nursing celebrated fall commencement Dec. 16, with Master of Nursing, Doctor of Nursing Practice and PhD students graduating. From left, David Wrobleski, Zachary Haag and Evan Beranek celebrate their graduation from the MN program.
CALENDAR OF EVENTS

March 28-May 27
Minnesota Historical Society
nursing exhibit

Sunday, April 2
Florence Schorske Wald Lectureship
on Palliative Care & Hospice Care

Monday, April 3
Alumni/Student Speed Mentoring

April 6-8
Midwest Nursing Research
Society Conference

Friday, April 7
Cardiac Arrhythmias: An Interactive
Update for Internal Medicine,
Emergency Medicine and Family
Practice
ANCC contact hours offered

Friday, April 7
10th Practical Orthopedics for
Primary Care Conference
ANCC contact hours offered

Thursday, April 20
Minnesota Valve Symposium
ANCC contact hours offered

Friday, April 21
Implicit Bias lecture with
Benjamin Reese

Tuesday, April 25
Master of Nursing
Information Session

Thursday, April 27
2017 School of Nursing All
Class Reunion

Friday, April 28
2017 Nursing Research Day
ANCC contact hours offered

Friday, April 28
Sigma Theta Tau International
induction ceremony

Wednesday, May 10
Alumni Society Board Meeting

Friday, May 19
Master of Nursing
Information Session

Saturday, June 3
Caring for a Person with Memory
Loss Conference

June 7-9
Nursing Knowledge: Big Data
Science Conference

Monday, June 19
International Relationship-Based
Care Symposium
ANCC contact hours offered

July 24-26
Adolescent Health Summer Institute

Saturday, Oct. 14
University of Minnesota
Day of Service
Visit www.minnesotaalumni.org for
more information

Saturday, Oct. 21
Homecoming Game vs Illinois
Visit www.minnesotaalumni.org for
more information

For more information www.nursing.umn.edu