Removing the Dark Clouds
How Nursing Provides Calm in the Storm
We have had a wonderful time celebrating the School’s 100th anniversary, and it has been delightful to reconnect with so many of you during this momentous year filled with special activities for all.

Our students, alums, faculty and members of the community have been inspired by so many of our nationally-renown Centennial Lecture Series speakers. We have heard innovative and provocative perspectives on everything from the future of nursing to health care reform. This issue of Vanderbilt Nurse includes information about our speakers, and I encourage you to visit the VUSN Web site to watch each of the presentations. I guarantee it will be time well spent.

This issue of our magazine also provides a snapshot of the Vanderbilt University School of Nursing’s Centennial Gala, held in November of last year. It was a magical evening where more than 500 people gathered to celebrate the collective accomplishments of the School. In doing so, we raised more than $140,000 for the School, much of which was made possible by generous corporate sponsors. It was my honor to also recognize our Top 100 Leaders who have done so much for our School and for nursing.

While we have been celebrating our anniversary, the economy is on the minds of everyone these days. Everyone has been impacted in some profound way, and there is much uncertainty. Vanderbilt Nurse takes a closer look at how the recession-resilient profession of nursing is affected and what the future may hold. The news for nursing is very hopeful. Two semesters into our first class of Doctor of Nursing Practice students, Senior Associate Dean Linda Norman provides insights into the program’s scope and shares her enthusiasm for this new degree and what it can mean for health care delivery. Finally, we introduce you to one of our amazing students, Christina Wirth, who happens to be a basketball star and promising nursing student.

I hope you enjoy this issue and visit our Web site to investigate additional interviews and information. While we have accomplished so much together, I firmly believe the best is yet to come.

Sincerely,

Colleen Conway-Welch, Ph.D., C.N.M., F.A.A.N., F.A.C.N.M.
Nancy and Hilliard Travis Professor and Dean of the School of Nursing
colleen.conway-welch@vanderbilt.edu

To view the Dean’s video greeting visit www.nursing.vanderbilt.edu/nurse/dean.html
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FLU SHOTS AND FUN

Vanderbilt University School of Nursing faculty and United Community Health Systems staff teamed up for a “Predators Care for Kids Night” hockey game in December. Nurse practitioners gave flu shots to 217 adults and 12 children throughout the game.

“We did roughly 150 shots in 30 minutes during the first period intermission,” said Bonnie Pilon, Ph.D., R.N., senior associate dean. “I have never drawn up meds as fast as I did that night.”

The Nashville Predators won the game and fans helped raise more than $31,000 for Monroe Carell Jr. Children’s Hospital at Vanderbilt.

CLUB QUARTERS HOTEL DISCOUNT

Starting immediately, all Vanderbilt University School of Nursing alums, students, faculty and staff can receive significant discounts on Club Quarters Hotel stays in some of the most visited cities in the world.

“We understand the amount of travel that members of our School do and wanted to help negotiate one of the best lodging deals available,” said Colleen Conway-Welch, Ph.D., dean of the School of Nursing.

Those affiliated with the Nursing School need to use the member code – VU – when making their hotel accommodations. Standard, superior and one-room suites are available. Rates begin at $89.

Club Quarters facilities are located in New York (three locations), Boston, London (two locations), Chicago (two locations), Washington, D.C., Philadelphia, San Francisco and Houston.

They are full-service hotels that offer user-friendly services for the business traveler such as free high-speed Internet, data ports and work stations. All locations have a restaurant and bar, room service, free use of computer/printer and fitness rooms.

Visit www.clubquarters.com to see specific locations and rates of Club Quarters hotels.

POWER OF ONE CAN IMPACT GLOBAL HEALTH: FRIST

Former U.S. Sen. Bill Frist, M.D., talked about the impact individuals can make on the global health care scene during the Vanderbilt University School of Nursing Centennial Lecture Series last fall at Wilson Hall.

Frist, former U.S. Senate Majority leader and incoming Owen School of Management and School of Medicine professor, spends about a third of his time working on various international medical mission projects, which have taken him to Russia, Tanzania, Bangladesh and Mozambique.

It started when Frist was at Stanford University and met Richard Furman, M.D., who encouraged him to get involved.

That one interaction started him down a path that has taken him out of the high-tech atmosphere of medical centers such as Vanderbilt, where he practiced for 10 years, and into more austere environments where the need is the greatest.

“You can do anything with fishing line, a needle, a knife and ketamine,” he said.

Frist detailed the last 20 years of the HIV/AIDS epidemic as an example of a disease that connects the world globally and calls for a united prevention effort.

On the floor of the U.S. Senate in 1996, Frist said that “HIV/AIDS is the greatest moral, humanitarian and public health issue in our lifetime,” and helped launch the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR).

While retrovirals are helping millions, he said, “For every one person retreating from the disease, there are four more new people coming in.”

Frist said that two-thirds of all deaths in developing countries are preventable and discussed a variety of ways individuals and groups can get involved.

He strongly believes nursing and medical students should spend at least one month working in health care in a developing country.

On one end of the spectrum, he encouraged audience members to seek out organizations such as the Millenium Group to make investments in Third World countries that meet a variety of requirements that ensure funds will indeed go to providing health care to individuals.

On a smaller level, he suggested people consider participating in “Knit One, Save One,” a grassroots effort to knit caps for newborns in Africa, since a significant number of babies die due to hypothermia.

“As a national policymaker and an international health care provider, Sen. Frist brings a thought provoking perspective to this crucial and universal issue,” said Colleen Conway-Welch, Ph.D., dean of the School of Nursing.

KATHY RIVERS

Visit www.nursing.vanderbilt.edu/centennial/events.html to view the entire lecture.
NEEDLEMAN SEARCHES FOR ANSWERS

Nationally known researcher, Jack Needleman, Ph.D., associate professor in the Department of Health Services, UCLA School of Public Health, recently presented his work about failure to rescue to a packed house of Vanderbilt students and faculty.

He walked through the evolution of the issue and further research he has conducted with Vanderbilt’s Peter Buerhaus, Ph.D., R.N., to make the measure more acceptable to clinicians, who have been concerned that complications acquired in the hospital be adequately distinguished from comorbidities present on admission.

Specifically, the research focuses on failure to rescue, and deaths among surgical patients with preventable complications. Findings include:

• The concern over distinguishing hospital and community-acquired complications is justified. Death rates are higher and length of stay is longer for patients with hospital-acquired complications.
• A patient’s primary diagnosis provides limited information for distinguishing hospital-acquired and present-on-admission complications. By using data on the present-on-admission status of these complications and primary diagnosis, current rules for excluding patients can be improved – specifically because their complications are likely to be present on admission.

Needleman made the case that the public views the failure to rescue measure as valuable and that the role nursing plays in reducing failure to rescue is significant. For these reasons, research to improve the acceptability and usability of the measure is justified.

– KATHY RIVERS

MION JOINS VUSN

Lorraine Mion, Ph.D., R.N., F.A.A.N., has joined the Vanderbilt University School of Nursing faculty as a tenured professor and holder of the Independence Foundation Professor of Nursing.

Mion is responsible for conducting research and providing support and mentoring for junior faculty involved in research.

“The recruitment of Dr. Mion expands our ability to provide research mentorship for junior faculty and students,” said Ann Minnick, Ph.D., R.N., F.A.A.N., senior associate dean, research. “Her international reputation will draw applicants to our research doctoral program and form a basis for our expanding geriatric nursing research initiatives.”

Mion’s interests lie in gerontology and safety and quality, and she is specifically investigating the nurse’s ability to assess, detect and manage delirium in patients with dementia and also discerning risk factors and outcomes of patients who disrupt care in the intensive care unit.

“I would like to be able to contribute to the knowledge base of caring for the elderly because we’ll all be there soon ourselves. To improve practice is really what it’s about,” she said.

Mion received her undergraduate degree in nursing from St. John’s College in Cleveland, Ohio, and then attended Frances Payne Bolton School of Nursing at Case Western Reserve University for both her master’s in geriatric nursing and doctorate in nursing.

By serving on the Joint Commission Task Force on Physical Restraints and as adviser to the Society of Hospital Medicine, Mion has helped shape health care policies related to the elderly.

Mion said she was inspired to go into nursing, and specifically geriatrics, by her high school work experience at a nursing home run by three gifted nurses.

“I thought they were so incredibly smart,” she recalled. “The doctors rarely visited, so they practiced at the advanced practice level.”

The Independence Chair, committed in 1989 by the Independence Foundation of Philadelphia, was part of a $10.8 million grant to nursing education that sought to bring national attention to the nursing shortage and aggressively fund scholarships and faculty chairs.

– LESLIE HAST

GET THEM WHILE THEY LAST

Vanderbilt University School of Nursing Centennial items are available at the Vanderbilt Bookstore in person and online through our Centennial Web site www.vusn100.vanderbilt.edu. All polo shirts, caps and mugs are 25 percent off. The specially commissioned Centennial scarf ($50), ties ($35) and book chronicling the first 100 years of the School ($34.95) are also available. There are only a few more months to purchase these one-of-a-kind mementos.

– JOE HOWELL
MEASURING SUCCESS

A class of Vanderbilt University School of Nursing community health nurse practitioner students recently participated in Taylor Stratton Elementary’s first school-wide health screening day. The students, American Red Cross employees, volunteers, school teachers and parents provided health screenings for Metro Nashville Public Schools’ students.

SHAKE-UP NEEDED TO REFORM HEALTH SYSTEM: SPEAKER

Clayton Christensen, D.M.B.A., the Harvard Business School professor and author who coined the term “disruptive innovation,” spoke at the Vanderbilt University School of Nursing Centennial Lecture Series, providing his insight on what it will take to transform health care.

Christensen defines disruptive innovation as a technology, process or business model that markets a significantly more affordable product or service that is also much simpler to use. It enables more consumers to use the product and results in the innovation replacing, or disrupting, the status quo.

“Almost every industry has gone through this cycle,” said Christensen. Using computers as an example, he discussed how centralized, sophisticated mainframe computers were disrupted by de-centralized mini-computers that ultimately resulted in the easy-to-use and relatively affordable laptops of today. Based on research from hundreds of different companies, Christensen cited examples of disruptive innovations that challenged established industries with less expensive, more user-friendly technology.

In the health care arena, disruptive innovations include advances in diagnostic imaging, ambulatory care and the roles of many different health care providers.

Christensen believes traditional large hospitals are no longer viable business models. He believes it made sense to centralize care due to the complexity and expense of technology such as imaging equipment and surgical suites. “In other words, hospitals focused on bringing the problems to the solution,” he said.

Instead, he encourages hospitals to move toward a model of “solution shops,” which reduce overhead and provide more integrated care for major categories of disease.

“What has to happen to make health care affordable and accessible is that we need to take the simplest of the problems handled at the general hospital and bring that technology to ambulatory centers,” said Christensen. “Then, we need to bring technology to the doctors’ offices so they can do the things that previously had to be referred to the ambulatory clinic.”

He went on to say that greater technology in the general practitioner’s office will reduce the need for referrals to specialists. Nurse practitioners and physician assistants will take on more responsibilities from physicians, and even patients and family members will take on more responsibilities.

“By enabling lower-cost venues of care and lower-cost caregivers to become progressively more capable – that’s the mechanism by which health care becomes affordable and accessible,” said Christensen. “Nursing as a profession, and nurse practitioners in particular, play a key role in bringing a solution to where the problems are.”

– KATHY RIVERS

Visit www.nursing.vanderbilt.edu/centennial/events.html to view the entire lecture.
LEARNING FROM BOTSWANA

In January, Botswana Minister of Health Lesego Motsumi traveled more than 8,000 miles to outline the state of nursing in her country as part of the Martin Luther King, Jr. Commemorative Lecture sponsored by the Vanderbilt Schools of Nursing and Medicine.

“One of the challenges facing our country is the shortage of expert human resources in health care,” Motsumi said. “I like to pay tribute to our nurses for their selfless dedication to the health and well-being of the community.”

She explained that nurses still carry out the burden of care, often doubling as doctor or pharmacist, especially in rural areas.

Botswana, a country of 1.8 million people, has only one doctor per 3,813 citizens and one nurse per 318.

“The patient-to-staff ratio is still below the desired level,” Motsumi said, and as health epidemics such as HIV/AIDS, tuberculosis and malaria continue to rage, more and more health care professionals will be necessary.

Motsumi said the answer to this shortage is the acceleration of training of all health care professionals, but she identified many barriers to that plan.

“We have the problem of a shortage of trainers. We also continue to send many trainees to institutions outside the country at exorbitant cost,” Motsumi said, and those trainees often never return to Botswana to practice.

Motsumi said Botswana hopes to continue to build relationships with American health institutions to bring state-of-the-art care to its citizens.

“It is our hope that we shall work together to face the promised land,” she said.

During the question and answer portion of the lecture, Motsumi addressed many concerns, from the political strife in neighboring Zimbabwe to the availability of maternity care and the efforts to remove the stigma of mental health problems.

Second-year medical student David Silvestri was especially interested in what Motsumi had to say about HIV testing because he studied screening efforts in Zambia during his emphasis project last summer. Botswana has begun to offer HIV testing, not at special testing sites but during routine clinic appointments, making the test more accessible and removing its stigma.

“Her comments regarding the importance of offering HIV testing at a location where there’s no stigma were right on,” Silvestri said. “Botswana has done this routine screening since 2004 and has really led the world on this issue.”

Silvestri also noted that it was a great occasion for Motsumi to speak during an important time in American and African history – the celebration of Martin Luther King Day and the inauguration of President Barack Obama.

“It is an honor of a lifetime to be so far away and share these occasions with you,” Motsumi said. “Indeed, I have something to remember.”

– LESLIE HAST

web link
Visit www.nursing.vanderbilt.edu/nurse/news/botswana.html to view excerpts from an interview with Minister Motsumi.
TEACHING VIA VIRTUAL REALITY

The Vanderbilt University School of Nursing was recently awarded a $1.6 million, three-year grant from Health Resources Services Administration's (HRSA) Innovative Nurse Education Technologies (INET) Program for the next step in simulation software management. When completed, portions may look a lot like popular gaming systems such as Wii, Xbox or PlayStation.

Research shows that all of Tennessee's nursing schools have some sort of simulation capabilities ranging from modest task trainers to practice blood pressure to high-fidelity mannequins. Unfortunately, most Tennessee nursing schools lack trained faculty to use simulation to its fullest potential. At the same time, the nation-wide nursing faculty shortage and a rise in nursing school applicants is forcing educators to look at new tools.

"We have simulation experts at VUSN in areas such as faculty debriefing, but most schools aren’t that fortunate,” said Betsy Weiner, Ph.D., R.N., senior associate dean for Informatics at the VUSN. "It almost takes a champion at each nursing school to help others see the benefits."

Weiner’s vision for writing this grant focused on helping nurse faculty to better manage the simulation experience with their students. She and her team want to develop a dashboard for educators that helps them to measure their own progress in meeting educational competencies related to simulation management. Long term, this dashboard could provide the same intelligence to nursing students so that simulation can be better integrated into the curriculum rather than a piece-meal approach that is so often used by many schools.

"The unique thing is that we decided to use the Second Life environment for one or more of the simulations,” said Weiner. Second Life is a three-dimensional virtual world where participants create a visual model of themselves (an avatar) and participate in a community, such as nursing simulation. Weiner’s group will create different scenarios using the 3-D graphics and incorporate video of high-fidelity simulators and perhaps even patients to help role-play.

Students like Lauren Mallard B.S.N., R.N., who studies between classes in the Frist Nursing Informatics Center, may benefit from new advances in simulated learning.

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Students will be active in the virtual reality world at the same time and will be assigned roles. One module may have an online lecture hall while another may be focused on simulation debriefing. Regardless, Second Life will provide what video streaming and e-mail exchange cannot: a richer, interactive experience. At the same time, nursing faculty will have an objective evaluation of their own teaching practices.

“I always end up wanting to do something the technology won’t allow me to do, so we are looking forward to working out all the details,” said Weiner.

The School of Nursing will be working collaboratively with the University of Kentucky College of Nursing to develop and pilot test the work. The goal is to market the training modules to nursing educators throughout a 16-state area in the South, deemed by Healthy People 2010 as having a high incidence of life-threatening disease.

– KATHY RIVERS
MARTHA HILL: FOCUS ON UNIFIED PUBLIC HEALTH

Today's health care system needs to bring different professions together to focus on common goals and measures of success, said Martha Hill, Ph.D., R.N., dean of the Johns Hopkins University School of Nursing, as she addressed the audience at the Vanderbilt University School of Nursing Centennial Lecture Series.

Known as a pioneer for her efforts in blood pressure research and as the only nurse to hold the office of president of the American Heart Association, Hill took a close look at the major factors that drive the academic engine, such as university commitment, teaching innovation, research and scholarly activity, talented faculty, motivated students, supportive infrastructure and effective partnerships.

She encouraged everyone in the academic arena to ask themselves: “Are we delivering on the promise?”

At the same time, Hill discussed some real-world limitations. According to the American Association of Colleges of Nursing, 36,400 nursing students were turned away from entry-level baccalaureate programs in 2007, due in large part to significant shortages of nursing faculty.

On the other end of the career span, she referred to the “silver tsunami,” the large percentage of nurses expected to retire in the next 10-20 years.

Hill tied all of these issues together by telling about her time as project investigator for a study of blood pressure interventions among a group of economically disadvantaged African-American men in inner city Baltimore — one of the most difficult subject groups to engage.

Hill illustrated how the study was built on public health nursing’s approach in the community and how colleagues in other disciplines also used the previously hard-to-reach subjects for additional studies. Meanwhile, students ranging from public high school students to nursing and medical students participated and were mentored to reach new personal goals.

“Martha Hill believes nurses are in a pivotal position to enhance health care, remove barriers to high quality care and reduce health disparities,” said VUSN Dean Colleen Conway-Welch, Ph.D. “In her view, and in mine, it all starts with shaping students to become leaders.”

— KATHY RIVERS

web link
Visit www.nursing.vanderbilt.edu/centennial/events.html to view the entire lecture.
U.S. REP. COOPER PRAISES THE NURSING PROFESSION

“Welcome to the Golden Age of nursing,” said U.S. Rep. Jim Cooper, as he kicked off in the Vanderbilt University School of Nursing’s Centennial lecture series. “By Golden Age, I mean growing prosperity for nurse practitioners, advanced practice nurses and nurses and also expanded scope of practice and reimbursement.”

In his speech to a standing-room-only audience of students, faculty, community leaders and VMC leaders, Cooper discussed how nurses are positioned well for the changing health care market and health care reform initiatives.

“Although most Golden Ages can be seen only in the rear view mirror, this one can be spotted through the windshield, and I hope you can see it like I can,” said Cooper.

He cited the trend of physicians abandoning general medicine and its result on what he called an “oversupply of specialists.” He backed up this claim with several sources showing that U.S. has one of the highest costs of health care, and yet is typically not ranked in the top 15 in health care outcomes.

Cooper also recognized that nurses focus on a holistic approach to health care delivery that helps ensure accurate diagnosis, prescriptions and appropriate treatment, and he emphasized that Congress is acknowledging the role that nurses play since all of the major health reform proposals will support nursing in some way.

“At the minimum, nurse practitioners and advanced practice nurses will fill the many gaps left by today’s physicians,” he said. “More comprehensive reform will lean toward complete parody of the healing professions.” He added, “This trend is undeniable.”

He also discussed health care reform, which he believes should trump global warming as one of the administration’s top initiatives. He supports “The Healthy Americans Act,” (Wyden-Bennett bill), a bipartisan bill that provides coverage for everyone using private plans. This bill is modeled after Congress’ own health care plan for its members.

Cooper believes that passing health care reform, even with broad consensus, will be challenging and described the issue in financial terms.

“The most fundamental equation in health care is the simple truism that the $2.4 trillion that we are currently spending on health care is exactly equal to the $2.4 trillion of vested interest – none of which want to give up a penny,” said Cooper.

– KATHY RIVERS

WEBINK

Visit www.nursing.vanderbilt.edu/centennial/events.html to view the entire lecture.
SAVING LIVES ONE DAY AT A TIME

Each year nearly 187,000 women are diagnosed with breast cancer and nearly 12,000 are diagnosed with cervical cancer. Early detection is crucial, so Vine Hill Community Clinic hosted a special Women’s Health Day last fall, designed to remove financial barriers to receiving high-quality preventive health care. University Community Health Services, in conjunction with Vanderbilt University School of Nursing, offered $30 women’s health exams including Pap Tests – compared to the typical exams which cost $250 in addition to Pap Test fees. Nurse practitioners, shadowed by nursing school students, conducted the exams. Here are a few ways Women’s Health Day made a difference:

• 45 well woman exams were done
• Many women were signed on for the breast and cervical cancer program, which allows future regular women’s health care visits that will be covered
• 17 made return appointments for follow-up on various issues
• 3 very serious issues were identified that required immediate follow-up

Vine Hill’s Women’s Health Day brought together resources for women of all ages and backgrounds.

HOWE: MEDICAL DIPLOMACY IS THE ANSWER

John Howe III, M.D., president of Project HOPE, made his objective clear during his presentation as part of the Vanderbilt University School of Nursing Centennial lecture series: “I want to put a ‘face’ on the issue of medical diplomacy.”

Addressing a standing-room only audience of members from the Nashville and Vanderbilt communities, Howe gave specific examples of how nurses, physicians and others are making health care available around the globe. Project HOPE (Health Opportunities for People Everywhere) is actively involved in 39 countries. It is probably best known for its humanitarian missions that include a 650-person team of health care professionals who live and work aboard the U.S. Navy Ship Comfort and bring much-needed expertise to hard-to-reach areas.

He set out to provide examples of how medical diplomacy, in his words, “gives hope, promotes health and knocks down hatred.” He spoke of the new 578-bed teaching hospital in Poland, the Shanghai hospital which had 3,000 open heart surgeries in children and the U.S. Navy Ship Comfort’s trip to Haiti. In each case, he mentioned a personal story like a 94-year-old woman, who had been blind for 30 years, but gained her sight back with the help of Project HOPE health teams.

On a perception and policy level, he gave two specific examples. Regarding a Project HOPE trip to the Middle East, he discussed the public image of Americans. Before the trip, there was a 20 percent favorable response to Americans, according to one poll. After Project HOPE teams saw more than 49,000 patients, America’s favorable rate increased to 60 percent. A vocal critic of the United States, Nicaraguan President Daniel Ortega was skeptical about a U.S. Navy ship full of health care volunteers helping his citizens. After Project HOPE saw thousands of patients, President Ortega openly expressed his gratitude.

“All of this is possible because our volunteers make a true difference, and there is an appetite for volunteerism in our country,” said Howe.

— KATHY RIVERS

SHARE YOUR STORY

My student days at VUSN included my first experience with people from all walks of life, and varying educational and socio-economic levels, a humbling experience. Having come to Vanderbilt University from a comfortable suburban background, I became aware that people are more alike than different in their essential humanness, their basic needs, drives, and many of their values. It followed that I developed a profound respect for all people. Against a backdrop of profound learning, we also had a lot of fun. My funniest memory is of one of our classmates making her first bed with patient in it. She worked very carefully to do everything just right. She worked on that bed, pulling all the sheets tight enough to bounce a dime. Then she heard the patient’s sounds of distress as he tried to extricate himself from under the draw sheet!

SYLVIA FERRELL ALDERSON CLASS OF 1953, M.S.N. ’76

We want to hear from you, too – your memories, accomplishments and perspectives. Please take a few minutes to post your story on our special Centennial Web site as part of our 100th anniversary celebration. Visit www.vusn100.vanderbilt.edu
CHRIS TANNER COMES TO VUSN

Vanderbilt University School of Nursing has chosen Christine Tanner, Ph.D., R.N., as the school’s Centennial Visiting Professor of Nursing Education. Tanner will work closely with the school’s 100-plus faculty to develop competency-based education programs and increase educational research scholarship.

“We are delighted to have Christine join us,” said Linda Norman, D.S.N., R.N., senior associate dean for Academics. “She is an innovator, a problem solver and an advocate who is known internationally for her work and dedication to nursing education. There is no doubt that she will leave an indelible imprint on the work we do and will do at Vanderbilt.”

Tanner is the A.B. Youmans-Spaulding Distinguished Professor at the Oregon Health Science University School of Nursing. She is recognized for her work in developing educational models and teaching strategies for nursing education, especially as a leader in faculty development for nurse educators.

Her work for the Oregon Consortium of Nursing Education revolutionized nursing education in that state. She has served as an editor of the Journal of Nursing Education since 1991, which is the premier journal for nurse educators. She is the author of more than 40 scholarly articles and seven books, which are staples for nurse educators across the world.

As Centennial Visiting Professor in Nursing Education, Tanner will conduct presentations and workshops and work with key faculty members throughout the calendar year.

– KATHY RIVERS

MODERN HEALTHCARE NAMES CONWAY-WELCH TO NATIONAL LIST

Colleen Conway-Welch, Ph.D., Dean of the Vanderbilt University School of Nursing has been named to Modern Healthcare’s list of the Top 25 Women in Healthcare for 2009. Conway-Welch was recognized for her leadership in the areas of nursing education, emergency preparedness, HIV/AIDS awareness, global health and the education of healthcare professional in the U.S. Military.

“Colleen is very deserving of this national honor,” said Harry Jacobson, M.D., vice chancellor for Health Affairs. “To be chosen as one of the Top Women in health care means you have had an impact. Colleen has had an enormous impact on health care and her field by redefining the nursing profession. She is a forceful advocate for an expanded role for nurses. She takes risks, and she leads.”

Conway-Welch will celebrate her 25th year as Dean of the VUSN this fall and is one of the longest sitting deans of a School of Nursing in the country.

Conway-Welch is a national figure who has served on top-level health committees dealing with national health and social issues. In 2007, she was appointed by Secretary Leavitt of DHHS to the Advisory Committee to the Director of the National Institutes of Health. She is a former president, and one of the founders, of Friends of the National Institutes of Health, National Institute for Nursing Research.

She was recognized as a Fellow of the American Academy of Nursing and a charter Fellow of the American College of Nurse Midwives. She is a member of the Institute of Medicine of the National Academy of Science. In 2008, she was awarded the National League for Nursing Award for Outstanding Leadership in Nursing Education.

– KATHY RIVERS

CORRECTION

The three nurses caps featured in our last issue were misidentified. The caps pictured are (L-R) Vanderbilt’s cap from 1976-present, Dean Colleen Conway-Welch’s nursing cap and the School’s nursing cap from 1929-1976. The nursing cap used from 1909-1929 is not pictured.
1. Lydia Howarth, Chancellor Nick Zeppos and Vanderbilt Board of Trust President Martha Ingram

2. A handful of the Top 100 Leader Honorees: Vicki Beaver (M.S.N., ’76, B.S.N., ’73), former faculty member Roberta Smith, Professor Donna McArthur (M.S.N. ’77), Virginia Betts (M.S.N. ’71) and Associate Professor Judy Sweeney (M.S.N. ’75, B.S.N. 70)

3. Julie Boehm, Cathy Thomas and Elizabeth Papel, three people who were instrumental to the evening’s success

4. C. Wright Pinson, M.D., Chief Medical Officer for Vanderbilt, gala guest and drummer for the evening’s entertainment – the band, Soul Incision

5. Colleen Conway-Welch, David Mills and Alisa Haushalter (M.S.N. ’97)

Visit www.nursing.vanderbilt.edu/news/gala.html to view additional pictures from the evening.
“Can unemployment be prevented and employment stabilized? . . . Flood, fire or earthquake, sweeping out of commission many factories in important industrial states, depriving 3,000,000 to 5,000,000 men of work, would be judged a great national catastrophe. Less dramatic, possibly, but no less important is the picture of bread lines in our large cities, of exhausted coffers of community chests and welfare agencies and the other evidences of suffering arising from the calamity of the unemployment.”

— LOUIS START, NEW YORK TIMES, APRIL 6, 1930
The economic news for 2009 is sobering. Since the recession officially started in December 2007, the housing market collapse, stock market instability and resulting job losses have cast a dark cloud over our country’s economy.

There have been several recessions in our country’s history, but most think about the Great Depression that ended the roaring 1920s – a time when unemployment was at 25 percent for many years. There were expanded needs for rural nurses, but no money to hire them. Voluntary agencies who hired nurses were dependant on philanthropic support which had dried up. A majority of nurses worked in private duty and as the crisis hit their clientele, demand for their services sharply dropped.

Eventually as the country started a massive, government-sponsored recovery, the Civil Works Administration hired public health nurses in 1933. Many believed that while the Great Depression’s hardships permeated every facet of American life, that nursing, as a profession, emerged stronger.

Fast-forward to spring 2009. While there are many uncertainties in today’s economy, including an 8.5 percent national unemployment rate, nursing remains a recession-resilient profession. There are important shifts taking place within the nursing workforce in this climate, but the future for nursing is as bright as ever.

More Full-Time Nurses

“The suddenness and severity with which this recession struck has caused many nurses to rejoin the workforce resulting in what appears to some as the end of the nursing shortage,” said Peter Buerhaus, Ph.D., R.N., director of the Center for Interdisciplinary Health Workforce Studies in the Vanderbilt Institute for Medicine and Public Health. “In the long-term, however, the shortage will remain significant.”

Buerhaus and his team collected registered nurse workforce data from 2002 through 2007 showing increases of 228,986 full-time nurses in hospital settings and 136,779 in non-hospital settings during that time. Data from 2007 shows nurse wages decreased by 1.7 percent, which correlates to the economic slowdown that started in late 2007. With unemployment rates anticipated by many experts to increase by 8 percent to 9 percent by year’s end, nursing still emerges as a more resilient career compared to most others.

But more nurses are carrying larger responsibilities among their families because of the recession.

“Seventy percent of nurses are married,” said Buerhaus. “This increases the pressure for RNs to work because they may very well be the sole breadwinner in the household.”

Lou Kahlen, R.N., is the clinical staffing manager for Vanderbilt University Medical Center Nursing and manages a pool of supplemental nursing staff that has a higher hourly rate than full-time nurses, but no guaranteed minimum of work.
hours per week. In one recent month, 16 of her 17-person group moved to full-time positions at VUMC.

“Many nurses had to make personal decisions like ‘my husband was laid off and I need insurance benefits so I need to work more,’” she said. She has also fielded many calls from RNs who have been outside the clinical area for several years, looking to return to nursing positions.

More Attracted to Nursing

Experts agree the current economy is likely to result in retired nurses re-entering the work world, part-time nurses increasing their hours to full-time, new RNs finding more competition for jobs than in years past. According to Buerhaus, economic pressures will keep current nurse wages stagnant, a tradeoff for an otherwise recession resistant job.

More people are re-tooling their skills to become nurses.

According to Buerhaus, a recent survey of Americans found that one in four has seriously thought of becoming a nurse. That and the pattern of seeking out further education in times of high unemployment, may be why many nursing schools are experiencing record numbers of applicants.

Paddy Peerman, M.S.N., R.N., assistant dean of Enrollment for Vanderbilt University School of Nursing, has seen a near doubling of applicants into the school’s master’s program in the last two years. Her admissions staff is weeding through 42 percent more applicants for fall enrollment than 2008. The School has 340 general openings for incoming M.S.N. students (including both nurses and non-nurses) and a total student body in excess of 700 students.

“In addition to the quantity, the quality of our applicant pool just keeps getting stronger,” said Peerman.

Villa and Ogle agreed that the course was most valuable in boosting their confidence.

“There is no course anywhere to get a person back into nursing. It is a very good stepping stone to rebuild confidence,” Villa said.

Vanderbilt University School of Nursing is offering two more courses this year – one in June and another in December.
Faculty Shortage Looming

The bad news is that the faculty shortage is narrowing the potential pipeline for nurses desperately needed in the future. The National League for Nursing reports that an estimated 90,000 applicants are turned away from nursing schools, due in large part to a severe faculty shortage.

Lois Wagner, Ph.D., assistant professor and head of the Tennessee Center for Nursing, believes the faculty shortage is looming large. She represented Tennessee at a nationwide consortium earlier this year to figure out how to help alleviate the shortage of nursing professors.

“What’s clear is that nursing can’t solve this issue on its own,” said Wagner. “We need to bring in business people, regulatory bodies, workforce investment and maybe even allied health to optimize health care at a time when the economy is imploding.”

She left the consortium believing that part of the problem was the typical career trajectory that includes a round of nursing education, associate or bachelor’s degree, followed by clinical practice for several years before considering pursuing advanced degrees. “The stop-and-go education we are used to in nursing only results in longer spans of time to develop potential faculty.”

Across the country, faculty members typically make substantially less than their clinical counterparts – that’s where basic economics can step in, according to Buherhaus.

“I would love to see a doubling of faculty salaries,” he said. “That would send a message to society and solve the faculty shortage problem very quickly.”

In the meantime, others point to examples of standardizing statewide nursing curriculums as Oregon has done or pooling faculty resources for various programs.

While headway is being made, state schools have experienced significant budget...
cuts and many nursing programs, like the University of Tennessee (UT), have been cut in half.

“My fear is that the cuts, like the ones at UT, will come back to haunt us a few years out,” said Kailen. “The influx of nurses we are seeing at Vanderbilt Medical Center now is economy driven, but that won’t last.”

Nursing Shortage – Not Over

Buerhaus and his team have the data to back up Kailen’s hunch. Their long-term projections show the aggregate age of the future nurse workforce will not be as old as previously forecast, but the lack of nurses in future years is still a significant issue.

By 2012, the largest age group of RNs will be between 50-60 years old. Buerhaus believes this is a good thing since many seasoned nurses have internal surveillance systems that can help identify nuances to improve patient care and outcomes down the road.

“It’s important to realize that this is probably the most experienced, wisest, knowledgeable workforce in the history of nursing in this country,” said Buerhaus.

His previous research projected a nursing shortage of 800,000 to 1 million by 2020. However, based on current trends, the nation will have 285,000 empty nursing positions by 2020, growing to 500,000 by 2025.

“Increasingly, the projected nursing shortage is viewed as much as a quality and safety problem as it is a workforce problem,” said Buerhaus. “There is no way possible that our health care system could function without a half million nurses.”

Recruitment: VUSN Style

Adding to the richness and diversity of the field of nursing is what recruitment at Vanderbilt School of Nursing is all about.

Each year, the recruitment staff reaches out to a range of candidates from high school students just beginning to explore a nursing career to experienced nurses who are considering an advanced practice degree.

One of their main messages is the caring role that nurses play in health care.

“The first word in nurse practitioner is nurse,” said Paddy Peerman, M.S., R.N., assistant dean for Enrollment Management. “The core part of the career is the nurse piece. The advanced practice nursing role is a nice blend of care and cure.”

Peerman also stresses job security, pointing to national and international shortage of nurses, and shows the many options in nursing.

“There is such a range of possibilities – sick, well, young, old, physical problems, mental health problems. You can even work in a helicopter,” she said.

Jana Lauderdale, Ph.D., R.N., assistant dean for cultural diversity, said one of the most important recruitment tools available for Vanderbilt undergraduate students is the Vanderbilt Pre-Nursing Society, which meets once a month to listen to speakers or engage in community service and averages about 40 attendees.

“Ideally they join their freshman year, and it helps solidify their decision for a career in nursing,” she said. “Many are still exploring the idea of nursing as a career, so we’re really in a position to educate them on what it means to be an advanced practice nurse and begin the acculturation process of moving from an undergraduate to graduate student. It is also a prime opportunity to highlight the philosophy and art of nursing.”

VUSN also holds an open house twice a year, which offers meetings with faculty in the various specialties, a panel of current students and financial aid information.

“It’s a day-long commercial for advanced practice nursing,” Peerman said. For Peerman and Lauderdale, diversity doesn’t just equate to ethnicity. They welcome students from all backgrounds regardless of factors such as age, gender, lifestyle, educational experience and geographic location.

“We stress that every year we see diversity at Vanderbilt increase,” Lauderdale said. “We have academic resources we make known to all our students for the purpose of supporting their assimilation into our program. We make sure the academic tools are available and show them how to access them. The message is ‘We want you to succeed.”’
Hoop dreams

At age 11, Christina Wirth vowed to earn a college basketball scholarship and then worked tirelessly until the recruitment letters started pouring in. Now in her senior year with the Vanderbilt women's basketball team, Wirth has her sights set on another goal: becoming a nurse practitioner.

STORY BY LESLIE HAST
PHOTOGRAPH BY JOE HOWELL
of people think that athletes just come to college just to play sports,” she said, “but a lot of us are working really hard to pursue a career, and not just some easy major. It’s important that people know that you can do both. It doesn’t have to be one or the other.”

Wirth, who grew up in Mesa, Ariz., came to the School of Nursing via the health and human services track in Human and Organizational Development, and although her first-year nursing courses required a bit of rearranging to accommodate her basketball schedule, her adviser, Terry Witherington, M.S.N., C.P.N.P., was more than willing to do that.

“She is an exceptional candidate, and we didn’t want to lose her. We worked hard to make this work,” Witherington said. “She appeared to know what she wanted to do and was willing to take the steps to do it. She didn’t choose the easy way out. She wanted to get in the field as quickly as possible.”

During the spring semester, first-year nursing students usually rotate through different clinical units every five weeks, and Wirth’s frequent travel to away games would have been a detriment. Instead, she focused on the didactic portion and resumed her clinical rotations when basketball season was over.

“This isn’t something that I’m doing because I have to. I’m excited about it,” Wirth said, but she admits that balancing athletics with a challenging academic program can be exhausting at times.

For example, when the team played an away game at Alabama, they returned to campus at 1:30 a.m. Because the team was scheduled to lift weights while she was in class, Wirth lifted before class at 7:30 a.m., and then attended class from 8 to 4. Then she had practice from 4 to 7 and spent the evening studying.

It’s that work ethic that has made Christina one of the leaders of the women’s basketball team. She is the 30th member of Vanderbilt’s 1,000-point club and ranks in the SEC’s Top 10 in scoring. She received top honors in the Southeastern Conference postseason awards, being named Scholar-Athlete of the Year and a unanimous pick for the All-SEC first team. She was also nominated for the State Farm Wade Trophy Division I Player of the Year, considered the Heisman Trophy of women’s basketball.

“Christina is a very skilled, hard-working basketball player,” said Head Coach Melanie Balcomb. “Her three-point shot is her biggest strength, but what sets her apart from other players is her versatility. Her selflessness, commitment to the team, and being a leader by example stands out the most.”

There is no doubt that athleticism runs deep in the Wirth gene pool, and the family of eight could easily field a team for most sports. Dad Alan, who played nine seasons of professional baseball, including a major league season with the Oakland A’s, says his wife Diane is probably the most athletic of the pair. She stays active lifting weights and exercising
and also enjoys watching all the children participating in their activities. Wirth's older sister Alana played basketball at Barry University, Christina followed in her footsteps playing college basketball at Vanderbilt, and their younger sister Theresa will likely play in college as well. Her younger brother Joe played soccer in high school, and her 10-year-old twin sisters LeeAnne and Jennifer play basketball on a team their dad coaches.

“I remember my dad would come home from work, and we would all pile in the car and go up to the park for a neighborhood game of baseball,” Wirth said. “We just always did things like that and loved being outside and playing, so that’s just something all of us learned to value.”

There is even a family connection with Wirth’s number 34. Alana wore the number in high school, and she passed it on to Christina. At Christina’s graduation, the number was retired, but not for long. The jersey was brought out of retirement for Theresa.
“Probably the biggest thing I can take from my time playing sports is teamwork. With anything in life where you’re working with people, you just have to know how to get the best out of them and how to earn respect and give respect.”

And for the twins? “We joked that they would be numbers 3 and 4,” she said.

Wirth started playing basketball at age 5, which she says “isn’t even basketball really, it’s just running around chasing the ball.” Alan Wirth said her drive and determination were evident right away.

“She was willing to do all the hard work. She would ask me to rebound while she did the 100 or 200 shots the coach asked her to do, then she would do another hundred,” he recalled. “I’m proud of not just basketball but the way she lives her life. She doesn’t take shortcuts.”
Wirth excelled at swimming and tried many different sports in her childhood, but it was the teamwork of basketball that won her over.

“I think that team sports in a way are more challenging because you have to find a way to work together. It can be really frustrating, but when you figure it out, it’s a great feeling,” Wirth said. “It’s exciting to get into a huddle during a dead ball and just look at each other and have a total sense of confidence. That sense of teamwork is really fun to have, and it’s not really a feeling that you can replicate in any other situation in life, at least that I’ve found. I hope I will with nursing.”

Though her 6-foot-1-inch height is great for basketball, it could present a challenge in nursing, especially because Wirth plans to specialize in pediatrics.

In a recent class, Wirth’s professor stressed the importance of getting down on a child’s level and not being intimidating. “Just my height alone in the general population makes me kind of intimidating to people, so especially if I was working with kids, there will be challenges,” Wirth said.

Wirth said there are many lessons from the basketball court she can carry over into nursing.

“Probably the biggest thing I can take from my time playing sports is teamwork. With anything in life where you’re working with people, you just have to know how to get the best out of them and how to earn respect and give respect,” she said.

“You have to learn how to push yourself when you don’t want to anymore. Those are the teams that become great. And I think that’s definitely something that can translate into nursing and putting the patient first.”

As Wirth’s best friend, roommate and fellow teammate, Jennifer Risper said, it’s Wirth’s caring nature that will make her a star at nursing.

“When she’s a nurse practitioner, patients will see how caring she is. She’s really caring to everyone, and it doesn’t matter where you’re from or what you look like. Patients will feel comfortable around her,” she said.

Risper has also noticed Wirth’s newfound excitement with nursing.

“She comes home and tells me about everything she has learned, and she’s like a little kid she’s so excited,” she said. “She constantly wants to grow and get better, and I know she will apply that to nursing.”

Wirth led the Commodores in exciting post-season play. They beat the No. 1 seed Auburn University to win the SEC Tournament, and Wirth was named the tournament’s most valuable player.

The team then had a great run in the NCAA Tournament, advancing to the Sweet 16.

When preparing for these big games, Wirth insisted she wouldn’t be nervous.

“When you’ve played basketball for this long, it’s second nature,” she said.

“When I’m walking onto the floor before the jump ball goes up, I’m a little nervous, but as soon as that ball goes up, I’m like, ‘OK, I’ve done this before.’ I’m going to miss that feeling.”

Editor’s Note: Wirth was the 19th pick in the 2009 WNBA Draft. She is taking a leave of absence from School and will play for the Indiana Fever this fall.

STUDENTS RAISE THEIR VOICES

Vanderbilt University School of Nursing students rallied state legislators in April at the Tennessee Nurses Association’s Lobby Day at War Memorial Plaza.

“The health of this state, starts with you,” said Tennessee Commissioner of Health Susan Cooper, M.S.N., R.N., as she addressed the audience of roughly 1,500 nursing students from throughout the state. “Each and every day, every decision I make is grounded in nursing — my education, knowledge and experience.”

Groups of students representing schools of nursing throughout the state shared their chief concerns in the health care arena.

There were more than 150 students representing Vanderbilt’s master’s program and undergraduate partnerships with Fisk and David Lipscomb universities.

Gary Dodd, who is pursuing the adult nurse practitioner track and a certification in palliative care, represented VUSN students during roll call. “We ask the Tennessee Nurses Association to place priority on legislation that will promote preventative health care,” he said.

“Such laws are far better fiscally and physically than medical interventions that are far more costly once health declines.”

Fisk student Leah Smith spoke for her fellow classmates emphasizing that obesity in children was their top priority. Lipscomb student Caleb Sisk represented his fellow classmates who believe recruiting more minorities into nursing is key.

After the morning session, students met one-on-one with many legislators.

Dodd viewed the significance of the day: “In addition to advocating for their patience, nurses also have the responsibility to support the profession of nursing by expressing their values and concerns in the political process.”
Why are D.N.P. programs in the country gaining popularity? The advanced practice community began examining the required curricula and realized that many of the master’s programs in nursing for the nurse practitioner, nurse anesthetist, nurse midwife, and clinical nurse specialist were beyond the number of credit hours for a typical master’s degree in any other field. With the explosion in knowledge for health care, advanced practice nurses also needed to have greater depth in evidence-based practice, quality improvement and systems knowledge at the provider level.

As I meet with advanced practice nurses across the country, I consistently hear they want the same education level as physical therapists, pharmacists, audiologists who each have a doctorate level. We need the D.N.P. not only for the advanced education that it provides but also to play an equal role on the interdisciplinary team.

What is the difference between the Ph.D. and D.N.P. program? The Ph.D. involves more independent research in the areas of health services and clinical investigation – focusing on developing new knowledge. The D.N.P. program prepares the advanced practice nurse to apply knowledge to the clinical situation and helps answer questions such as: How are you building knowledge about your practice? How are you using evidence in your practice to be able to improve the practice? We need both because they are linked together. The Ph.D. is the discovery of new knowledge, and the D.N.P. evaluates and implements it. The D.N.P. gathers evidence from the practice that then translates into the questions that the Ph.D. nurse needs to conduct the research needed.

What were the most important things in crafting the curriculum? We asked faculty, advanced practice nurses and others in health care to answer several questions. How is this new provider going to improve the health care system? What knowledge and skills do they need? What are the contextual issues about patient care that advanced practice nurses need to know? What is missing in the current curriculum? In all, we wanted to develop a curriculum that would broaden an advanced practice nurse’s knowledge base to be able to make profound changes in issues such as access to care and improving the process of care delivery.

What is different about the Vanderbilt D.N.P.? We have both a practice and systems focus. This program is seven credit hours a semester, which translates roughly into 25 to 30 hours of dedicated study time needed each week.

What should potential D.N.P. candidates ask themselves? What do I want to do when I get done? What area of expertise in my practice do I want to develop more expertly? Do I have time in my day/life to complete the coursework? Our program is seven credit hours a semester, which translates roughly into 25 to 30 hours of dedicated study time needed each week.

What are some of the lessons you have learned so far? Flexibility is the name of the game! Faculty members are working closely to ensure we are providing the coursework needed to enhance the knowledge of the advanced practice nurses in the class. As we progress with this first group, I think we are going to learn a lot about the sequence of content, the best methods to use between faculty, mentors and classmates. We have chosen to have a smaller list of students per faculty adviser to stay in closer touch through the process. Almost everyone in this first class is working, and they are using that environment to gain access to a patient population and practice environment related to their specific area of interest – a project integrated throughout the whole curriculum that the student designs, defends, implements and evaluates during the program.

Q + A

an interview with
linda norman

BY KATHY RIVERS
PHOTOGRAPH BY JOE HOWELL
to deliver the courses. We’ll be implementing ongoing program evaluation to be able to make the continual improvement needed, rather than waiting until the end of the program to begin assessments. We will investigate the possibility of creating a program that is B.S.N. to D.N.P., keeping a post-master’s entry option and masters exit option as well. The American Association of Colleges of Nursing set the time schedule for requiring the D.N.P. for those who enter advanced nursing practice programs as 2015, but we are monitoring the exact implementation of that recommendation as it may fluctuate.

Do D.N.P. graduates earn more money than M.S.N. graduates? We really don’t know yet. Much will be decided in the coming years by the value the employer sees in the D.N.P. If a D.N.P. can bring more cost analysis, leadership and improvement to the practice in a measurable way, that value should translate into higher compensation.

Do you anticipate our students seeing patients and patients calling them doctor? People typically use the word “doctor” with a physician, but these days there are a lot of other doctorally prepared providers such as physical therapists, pharmacists, audiologists, dentists and clinical psychologists. The issue is that patients need to be clear about the knowledge and skills of the provider they are seeing. We need to delineate roles better. When everyone is called doctor, you can’t figure out who does what. We are going to have to be clear in working with patients.

What role could the D.N.P. have in our national health care reform? Cost effective care that is accessible is a key factor in health care reform. Better prepared providers who understand the health care system as an integrate system that needs interprofessional care delivery, is going to be key. That’s exactly what the D.N.P. does. These are people who have the tools to say, for instance, we have problems with the way we are treating our asthmatics patients, so we’re going to figure out how to do this better.

What does the D.N.P. mean to nursing? I have been a nurse for 40 years, and this is the most exciting time in this industry. After years and years of being the fish that were swimming upstream, today nurses are much more valued in the health care system. Advanced practice nurses are exponentially more accepted in the health care delivery model than even 10 years ago.

Everybody wants to make sure we have a more cost-efficient, more time-efficient health care system, and we have all woken up to the need that we must work together as health care professionals.

If you had to do it over again would you do a D.N.P. or a Ph.D.? It would depend on what I want to do when I finished. When I finished my master’s, I was a clinical nurse specialist with practitioner skills. I worked in a health department setting up hypertension, prevention and adherence clinics across Southwest Virginia. I went back into an academic role and needed to have the research-oriented part of my role, so I chose a research degree program. But if the D.N.P. were a choice for me today, I’m not sure what I would do. The D.N.P. is very attractive. It gives advanced practice nurses more leadership opportunities in health care.

I saw my parents get involved in their professions and give back, so I wanted to as well. I’m a big believer in “you only get out of it what you put into it.”
Vanderbilt D.N.P.: Inside the First Year

With what their director calls a “pioneering spirit,” 33 students make up the first class of the Doctor of Nursing Practice (D.N.P.) program.

“There’s a sense of pride being the inaugural class in the School of Nursing’s centennial year. They will help to shape the program in the future,” said Donna McArthur, Ph.D., F.N.P.-B.C., F.A.A.N.P., professor of nursing and director of the D.N.P. program.

The D.N.P. is a terminal degree for advanced practice nurses interested in bringing evidence-based knowledge into clinical practice rather than conducting research.

That distinction was a perfect fit for Sharon Holley, M.S.N., C.N.M., who practices midwifery with Regional Hospital of Jackson in Jackson, Tenn.

“I was never planning on being a full-time researcher. I wanted to practice midwifery. I always knew I wanted something bigger then just practice though,” she said. “The D.N.P. focus is not on creating new research, like the Ph.D., but rather on using the research that is available and implementing that knowledge into practice using a system-wide approach.”

The students, now in their second semester, represent a variety of specialties, from family nurse practitioner to informatics, and range in age from late 20s to early 60s. More than half are from Tennessee, but the remainder are located as far away as Alaska and Washington.

The program is structured so that students meet on campus once per semester for intensive learning and complete the rest of their coursework online.

“They can continue to reside in their home state and take what they learn into their practice environments,” McArthur explained.

It’s a perfect arrangement for Alane O’Connor, M.S.N., F.N.P., who practices at the Maine Dartmouth Family Medicine Residency in Waterville, Maine.

“I really like Vanderbilt’s program because it provides intensive on-campus experiences but does not require me to relocate or leave my job,” she said. “The on-campus intensives are very important as they allow me to network with my colleagues and professors.”

The capstone of the D.N.P. program is a scholarly project.

“Students identify a health care problem or issue from their practices they want to answer. The types of projects include quality improvement, implementation and evaluation of evidence-based practice guidelines and designing new models of care,” McArthur said.

Marjorie Randall, M.S.N., R.N., is a nurse case manager for the Operation Enduring Freedom and Operation Iraqi Freedom Transition Clinic at the Nashville VA Medical Center. She is focusing on the nation’s newest combat veterans and the transition of health care from the Department of Defense to the VA.

“I have a passion for ensuring that our soldiers, sailors, airmen and marines receive the best possible care this country has to offer,” she said.

Tony Smith, M.S.N., R.N., A.C.N.P., a Vanderbilt LifeFlight Nurse, is investigating the incidence of pneumonia in patients intubated by flight nurses within the first 72 hours post-intubation. Based on the findings, a protocol will be developed to identify patients at high risk and provide recommendations for their care.

For Smith, the D.N.P. program brings him closer to his goal of teaching.

“When I no longer can climb in and out of the aircraft or walk up and down the halls of the hospital, I wanted job security and the D.N.P. can open up a variety of doors that will still be in the nursing profession,” he said.

McArthur is currently in the process of reviewing applications for the second class of D.N.P. students and exploring other entry points to the program, such as B.S.N. to D.N.P. She says the program’s impact is tremendous.

“The promise our D.N.P. students is bringing to practice, the leadership roles they have, and the potential for impacting health care is phenomenal,” she said.

– LESLIE HAST
FACULTY NEWS

Susie Adams, Ph.D., A.P.R.N., associate professor of Nursing, received the American Psychiatric Nurses Association Award for Excellence in Education.


Robert Bradley, M.S.N., R.N., assistant professor of Nursing, serves as column editor for the Journal’s Diagnostic Tips section.

Linda Beuscher, Ph.D., G.N.P.-B.C., assistant professor of Nursing, presented “Spirituality and Dementia Caregivers” at the Vanderbilt- Reynolds Geriatric Education Center Geriatrics and Gerontology Interest Group. She co-authored “Prevalence of Constipation Symptom in Nursing Home Residents” in the Journal of the American Geriatrics Society.

Stewart Bond, Ph.D., R.N., research associate in Nursing, published “Delirium at Home – Strategies for Home Health Clinicians” in Home Healthcare Nurse, and co-published “Delirium Resolution in Hospitalized Older Patients with Cancer” in Cancer Nursing.


Karen D’Apolito received the National Perinatal Association Individual Contribution to Maternal Child Health Award. She was appointed to the panel of reviewers for the Journal of Obstetrics, Gynecologic and Neonatal Nursing and wrote an article titled “Neonatal Opiate Withdrawal: Pharmacologic Management” which will be published in Newborn and Infant Nursing Reviews.

Sarah Fogel, Ph.D., R.N., associate professor of Nursing, was appointed to the advisory board of the Center for Lesbian Gay Bisexual Transgender Queer Intersex Life at Vanderbilt.


A poster by Jennifer Kim, M.S.N., R.N., assistant professor of Nursing, “An Innovative Teaching Strategy: Teaching Important Geriatric Concepts to NP Students Through a Budget Assignment” was awarded first place at the National Conference of Gerontological Nurse Practitioners in St. Louis.

Donna McArthur, Ph.D., R.N., program director, co-authored “Saying No to Secondary Prevention Guidelines: Client Values, Beliefs and Evidence-based Practice” in the Journal of the American Academy of Nurse Practitioners. She presented “Pain Perception and Quality of Life in Adults with ALS” at the Amyotrophic Lateral Sclerosis/Motor Neuron Disease Nursing Symposium in Chicago. McArthur and Terri Donaldson, M.S.N., instructor in Nursing, presented “The DNP in Academia: Contributions & Dilemmas” at the National Doctors of Nursing Practice Conference.

Sally Miller, M.S.N., R.N., instructor and Skills Lab Manager, and Maria Overstreet, M.S.N., R.N., C.N.S., assistant professor of Nursing, presented “Getting Past the Plastic: Nursing Students Performing Caring-Based Interventions During High Fidelity Simulation” at the International Nursing Learning Resource Centers in San Jose, Calif., and at the Tennessee Nurses’ Association Annual Convention; “Using a Simulated ACE Unit to Increase Nursing Staff Knowledge of Older Adult Care” at the Vanderbilt- Reynolds Geriatrics Education Center Quality in Geriatric and Long-Term Care Medicine and at the Tennessee Nurses’ Association Annual Convention; and “Teaching Clinical Decision Making With GRASP” at Clinical Simulation Conference in San Francisco. Both presented at the Simulation Conference in Nashville and hosted a collaborative simulation.

Anne Moore, M.S.N., R.N., W.H.N.P., completed the post-master’s certificate and is a nationally certified Adult Nurse Practitioner.

A review by Bette Moore, Ph.D., R.N.C., I.B.C.L.C., instructor in Nursing, “Early Skin-to-Skin Contact for Mothers and Their Healthy Newborn Infants” was recognized as one of the top 20 most accessed articles in 2007 from the Cochrane Library on Wiley InterScience.

Tonia Moore-Davis, M.S.N., R.N., C.N.M., instructor in Clinical Nursing, was elected to the executive position of Secretary of the Board of Directors for Health Occupations Students’ of America.

Shelagh Mulvaney, Ph.D., M.S., assistant professor of
Nursing, received a Pilot and Feasibility Grant from the Vanderbilt Diabetes Research and Training Center. She completed a clinical trial of a new Internet-based self-management intervention for adolescents with type 1 diabetes and will present findings from this research at the Society for Behavioral Medicine meeting in Montreal. Mulvaney has been accepted as a member of the Society for Behavioral Medicine Scientific and Professional Liaison Council.

Susan K. Newbold, Ph.D., R.N., B.C., associate professor of Nursing Informatics, wrote “Informatics and Healthcare Technology” in Issues and Trends in Nursing: Essential Knowledge for Today and Tomorrow, and co-edited Developing Online Learning Environments in Nursing Education. She presented at the National Taipei College of Nursing and the Cardinal Tien Hospital in Taiwan, the American Medical Informatics Association in Washington, D.C., and the National Healthcare Chief Nursing Officer Summit in Phoenix.


Randolph Rasch, Ph.D., R.N., served as keynote speaker for the 13th Annual Helen Miller Lectureship at North Carolina University in March. His speech focused on preparing for the future of nursing education and practice.

Mavis Schorn was promoted to associate professor at Vanderbilt. Her publications include “African American Nurse-Midwives: Continuing the Legacy” in Minority Nurse and “Pharmacological Management of Acute Pain in Breastfeeding Women” in the Journal of Emergency Nursing.

Kenneth Watford, M.S.N., R.N., was promoted to assistant professor at the Vanderbilt.

Penny Waugh, M.S.N., R.N.C., instructor in Nursing, received the Julia Hereford Award for outstanding contributions to student-faculty relations outside the classroom or clinic at Vanderbilt. She co-authored “Assessment of the Newborn and Newly Delivered Mother” in Intrapartum Management Modules: A Perinatal Education Program.

Betsy Weiner, Ph.D., R.N., F.A.A.N., senior associate dean for Informatics, served as guest editor of Nursing Clinics of North America. Contributors included Maria Overstreet, Trish Trangenstein, Ph.D., R.N., professor of Nursing, Jeff Gordon, Ph.D., professor of Educational Informatics of Nursing, and Ryan McNew, C.N.E., M.C.P., senior network manager, as well as former faculty member Renee McLeod, Ph.D.


CLASS NOTES

Eunice Moe Brock, B.S.N. ’41, is living an active life in China where she is the honorary president of a hospital which plans to build a 150-bed facility for the mentally ill. She continues to love adventure.

Peggye Guess Lassiter, B.S.N. ’57, M.S.N. ’62, retired since 2000, spends time with four grandchildren, three daughters, and her husband who is also retired. Lassiter has dealt with rehabilitation after spinal fusion. She believes her Vanderbilt years of study, experience and associations with fine women helped build a solid foundation.

Carolyn McKelvey Moore, B.S.N. ’57, M.S.N. ’59, Ed.D., is the mother of three sons and grandmother of five. She started the School of Nursing at the University of Arkansas at Fort Smith in 1968, which has graduated more than 3,000 associate degree registered nurses and also started a B.S.N. program. Moore has enjoyed philanthropic work for past 20 years and is eager to hear from classmates.

Evelyn Pet Shepherd Pruden, Ph.D., R.N., B.S.N. ’59, retired in 2002 from Barton College School of Nursing in Wilson, N.C., after 28 years of teaching including nine years as dean. She has been married to Charles Pruden for almost 50 years. The couple has three children and six grandchildren. She is looking forward to her 50th VUSN reunion this year.

Marion Bayless, B.S.N. ’54, M.S.N. ’63, is proud to be 81 and working with the U.S. Census Bureau. She hopes to see Vanderbilt nursing classmates at her 55th class reunion this November.

Carrol “Ditto” Smith, B.S.N. ’64, completed a Ph.D. in Nursing Science at the University of Illinois at Chicago in 2006. In 2007, she completed a post-doctoral research fellowship in Women’s Health Disparities at the University of Michigan. She teaches public health and women’s health at the University of Illinois and is working on qualitative research about lesbian women who have abused their female intimate partners.

Lola Harrison Llewellyn, B.S.N. ’65, is happily retired. She and husband, Bob, traveled to Vietnam and Cambodia on a trip with Vanderbilt Alumni Travel in fall 2008. She enjoys serving as president of the Woman’s Exchange of Memphis. Their daughter,
Kathy Llewellyn, M.S.N. ’05, is a nurse practitioner in Memphis. Their son and daughter-in-law live in Birmingham, Ala., with their daughter.

Connie Reid, B.S.N. ’65, is a proud alumnus who retired from nursing in 2007 and wants to see as many people as possible from the class of 1965 when they celebrate their 45th anniversary in 2010.

Suzanne Hopkins Blievernicht, B.S.N. ’66, has been practice coordinator for her husband’s integrative pain care practice in Asheville, N.C., for the past 10 years. After earning a M.S.N. from Emory University, she focused on critical care nursing, nursing education, hospice nursing, and being a free clinic volunteer and a Healing Touch Practitioner. The Blievernichts have two adult daughters and live on a small farm with a trained therapy dog. Their Web site is www.swbmd.com.

Susan A. Murphy, B.S.N. ’69 M.B.A., Ph.D., has written a four-part book series, “Maximizing Performance Management.” She combined her experience and knowledge with renowned experts to provide practical advice, information and guidelines with simple exercises to support the practice manager.

Jean Austin Massey, B.S.N. ’71, is a nurse practitioner in an internal medicine office and serves as a clinical preceptor for nurse practitioner students. Although she misses the academic life, she enjoys the mix of precepting and working in the office. She started receiving her military retirement this March.

Eddy M. Miller, B.S.N. ’71, is directing a research project on mild traumatic brain injury, funded by the Department of Defense, as part of her responsibilities as assistant professor in the Department of Neurosurgery at Baylor College of Medicine in Houston, Texas. She completed a master’s degree in nursing in 1979 at Emory University and earned her Ph.D. in Nursing Administration and Information Systems in 1991 at the Medical College of Virginia.

Nancy Curtis Brown, B.S.N. ’73, is a nurse practitioner in pediatric hematology and oncology at the Children’s Health System in Birmingham, Ala. Her husband, Rick (E.N. ’73) graduated from the University of Alabama at Birmingham School of Medicine and is in private practice in internal medicine. They have one son, Christopher.

Diane Ribblett Settlage, B.S.N. ’73, and her husband Steve (B.E. ’73) celebrated their 35th wedding anniversary in August 2008. Diane has been a stay-at-home mom raising children – Christi, Matthew, Jessica (B.A. ’08) and Joshua – and enjoys spending time with her 3-year-old granddaughter, Ashley Marie.

Leah Albers, M.S.N. ’74, B.S.N., ’71, was recognized for her career in midwifery at the University of New Mexico Health Science Center in Albuquerque, with an endowed professorship in midwifery, sponsored by a private donor and matched by the New Mexico State Legislature. Yale is the only other university with an endowed professorship in midwifery.

Ruth Fenstermacher Malinas, B.S.N. ’74, earned an M.S.N. from Texas Women’s University in 1978. She went on to graduate second in her law school class at St. Mary’s University in 1987. She is a partner in a San Antonio firm that does medical malpractice defense work, representing hospitals and other health care facilities. Her husband, Michael, is the clinical director of a non-profit agency that provides a variety of mental health, case management and support services. The couple has three children and two grandchildren.

Anne Jeffrey Wright, B.S.N. ’74, M.H.A., worked for 10 years at the bedside of children with cancer. For the past 15 years, she has been a hospital administrator at Nemours/Alfred I. duPont Hospital for Children in Wilmington, Del. She is the business development, marketing and strategy leader. Her version of public health nursing is arming families with information for the time that they need it.

Shirley Metz Caldwell Aldrich, M.S.N. ’75, retired in 1994. In April 2008, she married Bob Aldrich, and the couple spent eight months as volunteers to the Nazarene College of Nursing in Manzini, Swaziland. She recently helped start a baccalaureate program, and her husband, a retired minister, served as the interim chaplain for the college of nursing. This is the first training school for nurses in Swaziland.

Sue Coulter, B.S.N. ’75, earned an M.S.N. in December 2008 from the University of Tennessee at Knoxville as an Adult Nurse Practitioner. She will be working with David Huffman at University Diabetes & Endocrine Consultants in Chattanooga, Tenn.

Marilyn Pase, M.S.N. ’75, is an associate professor in the School of Nursing at New Mexico State University. She worked as the Associate Director of Undergraduate Program in 2008 and is teaching in distance edu-

Class Notes

SCHOOL WELCOMES HAFFKINE

Alumni and friends of the School of Nursing, take note: Sydney Haffkine is the new director of development for the Vanderbilt School of Nursing. She is responsible for building relationships with alumni and supporters and helping them to invest in the promise of the school’s students, the expertise of its faculty and the imagination of its research to answer health care’s biggest challenges.

She recently served as director of Vanderbilt’s Corporate and Foundation Relations office and is a graduate of the 2004 Leadership Vanderbilt program. Haffkine joined Vanderbilt in 2001 with nearly 20 years of experience in the financial services industry at First American (now Regions Financial) and SunTrust banks.

She leads the School of Nursing’s Development and Alumni Relations office, which also includes Susan Shipley, director of alumni relations, and Jennifer Woody, activities coordinator.
Charlice Wenger, B.S.N. ’75, is working in a Geriatric Center in Bellevue, Wash., as a clinical coordinator. She has three sons who are all attending universities in Washington this year.

Susan Robinson, B.S.N. ’76, served 10 years as an elementary school nurse and four as a coordinator of Health Services for the Columbia, Mo., school district. She believes the summers she spent with the Appalachian Student Health Coalition and years in public health were a wonderful foundation for her career. She and her husband recently relocated to Tallahassee, Fla., to be close to her family.

Cathy Cohill Carter, B.S.N. ’77; M.S.N./F.N.P. retired from the Navy Nurse Corps with 20 years of service in August 2005. After a stint in Oregon, she returned to Washington state and works as a nurse practitioner for Valor Health Care in a Columbia, Mo., school district. She is nationally known for her work in reproductive rights. Carter was recently appointed to the Board of Health for the City of Philadelphia.

Anne C. Page, B.S.N. ’80, was recently appointed to the Board of Health for the City of Philadelphia.
Elizabeth Burgess Dowdell, B.S.N. ’84, received a two-year, $1 million grant to survey suburban public and nonpublic high school students to identify if their health risks parallel their Internet risks. The study is a joint effort among Villanova University College of Nursing (where Dowdell is an associate professor in Maternal/Child Nursing), the Boston-based Justice Resource Institute and Boston College School of Nursing and funded by the U.S. Department of Justice’s Office of Juvenile Justice and Delinquency Prevention.

Lana Yaney, B.S.N. ’86, was selected to be a journal reviewer for the American Association of Nurse Anesthetists Journal for the September 2008-August 2009 year.

Cheryl Lankharr, M.S.N. ’89, has been a nurse practitioner at the Franklin Women’s Center in Franklin, Tenn., for eight years.

Christine Shih, M.S.N. ’99, served as a nurse practitioner at Johns Hopkins Cancer Center for three years and as a nurse educator. After she became a mother, Shih started refocusing on writing, inspired by a project she did at Vanderbilt linking American Literature with American nursing during the Civil War. A reader of classics, Shih will present at the Bicentennial Jane Austen 2009 Conference being held at Austen’s home in the U.K. this July.

Traci Turner Boswell, M.S.N. ’03, and her husband, Bo, announced the arrival of their son, Turner (below), who was born on Oct. 3, 2008: 7 pounds 14 oz and 19.5 inches.

Whitney Simmons, M.S.N. ’03, was recently engaged to Bradley Wormer and the couple has selected Sept. 12, 2009, as a wedding date. She is the current president of the VUSN Alumni Association Board of Directors and led the nursing alumni team at Nashville’s Country Music Marathon in April.

Jane S. MacLean, M.S.N. ’03, published an article about public health nursing that appeared in Advance for Nurses Magazine (California editions) in August 2008. She is the current president of the California Conference Local Health Dept Nursing Directors, director of Public Health Nursing for Lake County.


Samantha Mulder, M.S.N. ’04, and her husband welcomed a daughter, Fiona Jane Mulder, on Oct. 25, 2008.

Lisa Marie Forte, M.S.N. ’06, and John Greg Forte celebrated the birth of Sawyer Alexander Forte on Nov. 15, 2008. They live in Bethpage, Tenn.

Anna Bergman, M.S.N. ’07, is a women’s health nurse practitioner at Franklin Women’s Center in Franklin, Tenn. She began working at this facility as a nurse assistant when she was a teenager and worked with

Cheryl Lankharr, M.S.N. ’98, as a nursing student during her first clinical rotation.

Andrea Maria Boohaker, M.S.N.’07, married Michael Edward Dean on July 26, 2007, in Birmingham, Ala. She is a nurse practitioner for the University of Texas Orthopaedic Surgery Department. Dean is the Compliance Coordinator and Assistant Athletic Director for Rice University. They reside in Houston.

Jennifer Dible, M.S.N. ’07, and Aaron Dible welcomed a new son, Joseph Dible, on June 1, 2008. They live in Hermitage, Tenn.

Rachel Kinder, M.S.N. ’92, Ph.D. ’08, successfully defended her dissertation entitled, “Development and Validation of the Student Activation Measure.”

IN MEMORIAM

Nancy Crawford LeSac, B.S.N. ’79, died Jan. 19, in Oconomowoc, Wisc. She spent 25 years as a labor and delivery nurse at the Medical College of Virginia, where she received the 2008 Service Award. LeSac was a poet, writer and member of the national organization American Christian Writers. She was diagnosed with brain cancer May 2007, fought a brave fight, and continued to keep her sense of humor and deep faith throughout her struggle. She is survived by her mother, sister and a niece.

Mary Elizabeth Steagall Taylor, B.S.N. ’33, died Dec. 6, 2008, at age 99. She was a native of Rockvale, Tenn., and is survived by three sons, Admiral Jimmie Taylor, Reverend W. Garie Taylor, and Judge Royce Taylor; three sisters, one brother, many grandchildren and great-grandchildren. Taylor was the wife of the late James W. Taylor who died in 1995. She was the oldest surviving alumna from the Vanderbilt School of Nursing, and was honored last year as the oldest living Middle Tennessee State University female basketball player.

Esther Stauss Clinton, B.S.N. ’42, died Nov. 17, 2008, in Houston, Texas, at age 91. She was a student nurse at Touro Infirmary in New Orleans. She served three years on the faculty of Fort Sanders Hospital in Knoxville, Tenn., and married Leonard ‘Larry’ Guy Clinton Jr. in 1946. She taught nursing and served on the State Board of Nurse Examiners while Larry attended Vanderbilt Law School. The Clintons moved to Houston where he was an employment law attorney at Fulbright & Jaworski for more than 35 years, eventually partnering in Caldwell & Clinton. She was an avid bird watcher, environmentalist and an Astros fan. She is preceded in death by her husband.

Ethelwyn Reneau Jane Finch, B.S.N. ’45

Delores Bowyer Holden, B.S.N. ’57

Sarah Sloss Sutherland, B.S.N., ’45

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1. Mary Jane Fuller Albert and Elizabeth White Cleino, Ph.D., from the Class of 1944

2. Roberta Smith, Ph.D., Adrienne Ames, M.S.N. ‘75, Carol Etherington, M.S.N. ‘75, Marilyn Dubree, M.S.N. ‘76, Betsy Kerr Hay, M.S.N. ‘76 and Ann Patterson Luther, M.S.N. ‘81

3. Colleen Conway-Welch, Ph.D., and Rhonda Greer, Friend of Nursing Award recipient


5. Marilyn Davis, M.S.N. ‘98, and Linda Tittsworth Harrell, B.S.N. ‘65

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