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welcome message



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We talk a lot in health care these days about seamlessness. Our hospitals need nurses with knowledge and skills required to provide seamless care. Our nursing education programs are working to facilitate more seamless academic progression so nurses can practice to the full extent of their preparation.

With this in mind, a question I asked myself last fall when I became dean of the University of Utah College of Nursing was: How can we make this transition as seamless as possible? Any organization can unravel a bit during a leadership change. Take one that is facing the complexities brought on by rising costs of education and diminishing financial resources, and even the strongest of teams could come apart a bit at the seams.

The answer to my question is contained within this edition of the College of Nursing magazine. You'll read about Assistant Professor Lauri Linder, PhD, APRN, CPON, whose pediatric oncology research is putting technology in the hands of patients in an effort to explore more seamless symptom management for sick kids. We'll introduce you to alumna Danielle Howa Pendergrass, DNP, who, as part of her capstone project, helped tear down a Medicaid payment wall of the past 17 years that previously only recognized Utah's pediatric and family nurse practitioners, certified nurse midwives and certified registered nurse anesthetists. Now all nurse practitioners are part of this important mix; as a result, Utahns—particularly those in rural communities—have better access to comprehensive health care.

You'll also meet Ansilene Ozberkmen (BSN 1957) and Eileen Engh (BSN 1982), two Washington, DC-based alumni who created a

mentorship program to help our students learn about the role of nursing in health policy so they may begin to develop their own voice as a nurse.

Then there is our Alumni Board of Directors. These health care professionals represent the Wasatch Front's major health care systems and work in sub-committees toward one overarching goal: How to create a more seamless transition from student of the college to graduate of the college.

It's a bit of a coincidence that the faculty members we feature in this issue happen to be alumni. And yet it isn't. Brenda Luther, PhD, director of our clinical care management program (Utah's first) tells me she likens her own relationship with the college to the spinning icon that appears on her computer screen when a program is loading: unending. Dr. Luther holds two degrees from the college and has been active on our Alumni Board of Directors for more than a decade. She spent more than 22 years working at Shriners Hospital for Children, and tells me her role in the development of the clinical care management program helps her feel she is streamlining resources for the kind of patients and families she served in the clinical setting for more than two decades.

The College of Nursing community I have the privilege of leading is comprised of people who, at every level, are working to develop a more unified health care delivery system. As I near the end of my first year as dean, I have the College of Nursing community to thank for making the transition so seamless.

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Utah's first care management program is data-driven, care-centric



Nurses have been delivering clinical care management for decades, but until last year, there were no educational pathways or entry points to actually become a care manager. A 'skills acquired 'on the job' role, care managers "evolved in the workplace, sometimes directly, sometimes indirectly," says Brenda Luther, PhD, assistant professor.

That all changed two years ago when a consortium of leaders in health care and higher education in Utah met to explore opportunities to improve the health of citizens through initiatives in higher education focused on health care. The group, which included representatives from Intermountain Healthcare, University of Utah Health Care, IASIS Healthcare and HCA/MountainStar Healthcare, determined care management, as a competency for nurses, would benefit Utahns. The concept: develop a structure by which to create, model, assess and direct values-driven health care for populations and individuals.

Leaders in higher education from three nursing programs in Utah collaborated on the development of a program of study and course curriculum in care management, and in fall 2013, the University of Utah College of Nursing, the state's flagship nursing program, launched Utah's first care management program.

Comprised of eight experienced care managers who were selected by the consortium to represent their individual systems, the first cohort of students is playing a dichotomous role in helping to shape the program's post-baccalaureate certificate and master's of science in nursing tracks—that of educator and student. According to Luther, students review curricula to ensure the content of the program will help provide their employers with future employees; they'll also be serving as preceptors for future cohorts. "The care management program opens up



Left: Kathleen Atencio, a care manager with University of Utah Hospitals and Clinics and Tracey Nixon, a student in the original care management cohort, collaborate with Spencer Steinbach, a capacity management coordinator.

vast professional opportunities for nurses, and assists the health care industry in reducing their training processes for care managers,” Luther says. The program is designed to prepare individuals to understand care management from many perspectives—individual, family, community, and society. Students engage in didactic and practicum experiences in episodic and long-term care management of clients (allowing them to assess, measure and improve outcomes) and can even design a program of study to meet their specific education goals. Or, they can select from several areas of emphasis including healthy aging throughout the lifespan, geriatric and pediatric care management, disease-specific care management, and research and evaluation.

Luther believes that in the future, care managers will be the link, not only between clients and health care systems, but also data and people. “Health care is at a very unique place in that we have exploding knowledge from data. We can see trends and predict trajectories in ways we couldn’t before data were collected, assessed, and examined,” she says. “Care managers can use data on what really happens with those we are charged to care for to help our industry create unique programs based on accurate assessment.”

As health care reform ensues, nurses with skills of assessment and intervention focused on health and illness trajectories are in high demand; Care managers have been identified as key professionals to help promote positive health choices and healthy outcomes—all in an effort to provide the best care in the most appropriate place. “It’s a privilege to be a part of an individual and family’s life when their care decisions are complex, worrisome, or even burdensome, and to help create a trajectory of illness and wellness that works for a person and their family,” Luther says. “Doing so requires accurate assessment of the environment, best use of resources and dedicated follow up to ensure the plan works for all, and the outcomes are what the person wants.” She believes the cohort the college has gathered is part of a new way of providing health care: one based on linking services, communicating with teams, and promoting personalized care. “We’re taking what nurses already do well and learning how we can do it even better to support the values and needs of clients and families at very crucial times in their lives.”

Changing face of women's health



Visit the web site for Eastern Utah Women's Health, the practice Danielle Howa-Pendergrass, DNP, APRN, WHNP-BC, operates in Price, Utah, and you'll be greeted by a bright, iridescent shade of pink. Howa-Pendergrass says the site is a reflection of the interior of her practice, which is designed in pop pink and bold black, and furnished with comfy furniture so patients feel as though they are visiting a friend's home. Spend a few minutes speaking with the women's health nurse practitioner and you'll find the web site also is a reflection of her passion for women's health.

Last year, following more than a decade of advocacy efforts on behalf of nurse practitioners (NPs) in Utah, Howa-Pendergrass helped see to fruition a milestone move in the Utah State Medicaid Program: the elimination of a clause that prevented NPs from equally participating in the system. Howa-Pendergrass took on the outdated policy as part of her Doctorate of Nurse Practitioner (DNP)

scholarly project at the University of Utah College of Nursing. Particularly instrumental, says Howa-Pendergrass, was a course on leadership taught by Assistant Professor Jane Dyer, CNM, FNP, MBA, PhD, FACNM, in which Dyer had students choose a policy and explore how they would change the policy. "The DNP program at the College of Nursing was designed for me to succeed," Howa-Pendergrass says. "Coursework prepared me to formulate my approach to address the policy issue, and to better articulate to policy makers the underlying social implications of not having access to care."

As an agent of change, Howa-Pendergrass networked with colleagues, joined forces with coalitions and built relationships with policy makers. Thanks to a unanimous vote by the Medical Care Advisory Committee in favor of allowing all certified NPs the ability to directly bill and be reimbursed by Medicaid, patients now have access to NPs with specialties in primary and acute care, geriatrics, neona-



Left: In her Price, Utah clinic, Danielle Howa-Pendergrass strives to create an environment for patients that "allows them to feel like their own living room," she says.

tal, psychiatric/mental health and women's health. "It was a team effort for several years," she says. "Many people laid the groundwork for this and never stopped trying. I'm thankful I had the experience of being a women's health nurse practitioner for 10 years so I could use my time in the DNP program to focus on making major changes for NPs throughout Utah." Howa-Pendergrass also attributes some of it to timing. "Looking back on what we accomplished, I believe the timing of health care reform, the Medicaid expansion option and my entry into the DNP program created the ideal environment for me to take on this policy issue."

In rural Carbon County, Utah, where Howa-Pendergrass was born and raised, the elimination of this practice barrier is a game changer for women's health. "It has always been challenging to recruit OB/GYN physicians to our area," she says. "Those who do come often stay for two years and leave. As a result, women in my area have been underserved." With a service area stretching over three counties, Howa-Pendergrass opened her clinic in an effort to fill the gap. "I had a population of women whom I

wanted to take care of, and who needed the services, and yet Medicaid was preventing us from working together."

Nurse practitioners are recognizing Howa-Pendergrass for her efforts: In 2013 she was awarded the Utah Nurse Practitioners State Award for Excellence in Leadership. "I do this work because I love what you do," she insists. "To be recognized by my peers for doing it is additionally meaningful." She is the first nurse practitioner in her community to receive the award.

"Dr. Pendergrass, came into the Doctor of Nursing Practice (DNP) Program as an experienced clinician passionate about increasing access to high quality health care for women in Carbon County, but feeling frustrated by the lack of options," says Dyer. "The DNP Leadership Course gave her the skills, background and support to turn her passion and frustration into action. She is a wonderful example of the positive changes that a clinically-focused APRN can accomplish when given the tools in the DNP Program."

Symptom management in hands of pediatric oncology patients



A 13-year-old cancer patient is using an iPad application (app) to report cancer symptoms that a team of researchers from three children's hospitals will then analyze. He drags and drops two symptoms onto the screen: nausea and pain. He then draws a relationship between the symptoms and labels the category "crap" to articulate in his own words how being nauseous and experiencing pain make him feel.

Leading the team of researchers is Lauri Linder, PhD, APRN, COPN, assistant professor with the University of Utah College of Nursing and clinical nurse specialist for the Cancer Transplant Center at Primary Children's Hospital. Utilizing grant funds Linder received from Alex's Lemonade Stand and St. Baldrick's Foundation, the research team collaborat-

ed with Intermountain Healthcare's Homer Warner Center for Informatics Research to develop the app.

The app, Computerized Symptom Capture Tool (C-SCAT), is being used by adolescent and young adult cancer patients to create graphical images of relationships between symptoms they are experiencing and to identify the priority symptom in each group based on their own perspective. "In past studies, we used to give patients paper and a pencil and ask them to circle their symptoms. Then we, as researchers, applied statistical methods to analyze the data," says Linder. "With C-SCAT, we empower the individual and give them the opportunity to tell us what symptoms they believe are related and what they believe makes certain symptoms better or worse. Our goal is to give the data to their

provider and it becomes the basis for a conversation regarding what is happening with their symptoms." The underlying goal of the study, Consortium to Study Symptoms in Adolescents with Cancer, is to identify and evaluate the feasibility and acceptability of the app. The overarching objective of the collaborative nature of the study is to advance pediatric oncology research. "By working collaboratively between institutions, we are able to extend the reach of pediatric oncology research, and hopefully, help more kids," Linder says. "We formed the consortium with this in mind." After recruiting adolescents, a member on the team at Seattle Children's Hospital brought in additional funds in order to recruit a young adult sample of 19 to 29-year-olds.

Through paper and poster presentations at professional meetings, the research team has received positive feedback from clinicians, including interest in seeing the C-SCAT used in clinical settings. It already has a strong fan-base among study partici-

pants: Eighty-three percent of patients indicated they prefer reporting the self-study on a computer than on paper. (One participant gave the latter the category of "homework" to describe how it makes her feel.) And there have been other surprise benefits, such as the report from a 15-year-old girl suffering from neuropathy in her fingers that using the touch screen was more forgiving on her fingertips than writing with a pencil.

For Linder, symptom management is at the heart of nursing and a natural outflow of her 24 years in clinical practice. "My clinical questions come out of my practice experience," she says. "And the underlying goal for me always is to identify elements of caring for kids that we as nurses can continue to improve on in the future."



Alumni empower students to develop nursing voice



Early in her nursing career, University of Utah College of Nursing alumna Eileen Engh, MS (BSN '82) attended a brown bag seminar on the profession of nursing. The presenter offered powerful advice about the opportunity nurses have to effect change:

"If I have any advice to share with you, nurses, it is to learn to organize your ideas as a group so you can speak in one voice."

Now Engh, a manager of nursing research at Children's National Medical Center (CNMC), and fellow Washington, DC based alumna Ansilene Ozberkmen (BSN '57), are striving to pay the concept forward by imparting the wisdom onto College

of Nursing students. Last month they hosted a group of nursing students in Washington DC for the second annual DC Experience, an intense course on improving communication, reaching out to lawmakers, and affecting meaningful change when it comes to health care policy in the United States. Put together for nursing students attending the Hinckley Institute's Capital Encounter, the program helps future nurses learn the basics of the elevator pitch, and the ins and outs of talking policy.

"The decision makers often need what nurses readily know," says Engh. "It's never too early to empower nursing students to use the power of what they know, and to prepare them with skills to communicate with people that are not nurses."

The student nurses were able to put their skills to use during their trip, meeting with Congressman Rob Bishop (R, Utah, 1st district) and Congressman Chris Stewart (R, Utah, 2nd district). "I feel more educated in how public policy is formed, funded, and negotiated," says nursing student Melissa Alm, one of the 2014 participants, "I can see myself now becoming a problem solver, not just a problem identifier who doesn't know where to start affecting change."

For Ozberkmen, the DC Experience is also about furthering the legacy of her College of Nursing classmate and longtime friend Lillian Brown (Williams), who was a leader in nursing administration at CNMC before she passed away from cancer. "One thing Lillian and I realized when we first arrived in Washington, DC back in 1957 was how well our education at the College of Nursing had prepared us for so many things we ultimately encountered in the clinical setting," says Ozberkmen. "We also grew to appreciate the value of academic progression. After Lillian earned her master's degree in hospital administration she said to me, 'Now all the things I've complained about I can actually do something about.' On some level, with this project, I want to help students embrace that concept early on."

What was a grassroots effort in year one (Ozberkmen donated funds to help pay for the students' hotel accommodations and divided the meal expenses up with Engh) is now supported by a \$4,000 gift from donors Nancy and Nick Ward. The funding not only makes the program sustainable, it also helps expand its reach to more students, which will in turn help advance a secondary goal Engh has with the program. "I want to help students learn to see the benefit of connecting with alumni over the span of a career," she says. "In school, you sometimes think it is just about finishing. It is so important to learn how to tap into those resources before you actually need them."



Lifelong engagement begins with U

Third semester accelerated BSN student Zack Huston spends a lot of time thinking about life after graduation. He wants to enroll in the Critical Care Internship program at University of Utah Hospital and divide his time between the emergency department and an intensive care unit. Within five years, he hopes to be working as a flight nurse. He'd also like to serve in the United States Air Force Reserves. At some point, he plans to pursue a doctor of nursing practice.

Members of the College of Nursing's Alumni Board of Directors also spend a great deal of time thinking about Zack's future. What resources will he need to meet his career goals? How might Zack one day share his knowledge with the next generation of nurses? And how, regardless of where Zack's career takes him, can the College of Nursing continue to elevate for him—and all alumni—the value in being a graduate of the college?

"Our students as well as our alumni are very busy people, so we have to think outside the box in terms of how we engage them," says Board President Jody

Osteyee, CNP, APRN, CPNP. "We recognize that as a board, we need to do a better job of making the transition from student at the college to a graduate of the college as seamless as possible. We're focusing a great deal on how we get students to think of themselves as alumni, and alumni to think of themselves as mentors."

In 2013, the Alumni Board welcomed six new members. In doing so, the board not only enhanced its reach (all major health care organizations along the Wasatch Front are now represented), it also gained new resources with which to restructure and regroup. Sub-committees were formed in areas of Alumni and Community Engagement, Student Programs and Honors for Nursing (the board's major annual event which raises funds for nursing student scholarships). From serving pancakes to students at the crack of dawn to showcasing alumni via a new online Class Notes web page, the board is finding ways to support students and alumni alike in an effort to engage them.





"We have board members with very strong leadership skills," says Jody Osteyee, president of the Alumni Board of Directors. "They are enthusiastic about sharing their knowledge and so willing to give their time to further our mission."

Far left: College of Nursing Alumni Board of Directors, 2013-2014.

And, to ensure students have a voice in the overall strategy, Huston and fellow student Joni Whiting, Student Advisory Committee (SAC) co-presidents, serve on the board. The Alumni Board in turn sends a representative to all SAC meetings to address student needs and exchange ideas. "Students, especially in the accelerated cohorts, are eager to connect with, and get advice from, experienced nurses," Huston says. "The Alumni Board is a natural choice and has been an excellent partner."

The board is working to establish a student emergency fund and a mentorship program that will connect alumni with students for networking opportunities. "It is an exciting time for the Alumni Board as they provide new oversight and direction for the benefit of all alumni, students, and friends of the college," says Melanie Osterud, director of advancement. "The board is united and engaged with Dean Trish Morton and faculty of the college; alumni should be proud of the commitment and time spent by volunteer board members, on their behalf, to strengthen resources for the benefit of the entire alumni network."

Are you a graduate of the College of Nursing? The Alumni Board invites you to submit a Class Notes update and share with us your accomplishments and career highlights. We also invite you to become involved with the College by volunteering some of your time by participating in student mock interviews or in the new mentoring program. There are many ways to get involved.

If you would like to learn more, please contact Melanie Osterud, director of advancement, at (801) 581-8919 or melanie.osterud@nurs.utah.edu.

Alumni Notes

MS '06, BSN '03 - Benjamin Becker is currently a nursing project coordinator with Intermountain Healthcare. Ben is a past-president of the Alumni Board of Directors and currently serves as the chair of the 2014 Honors for Nursing.

BSN '10 - Karen A. Gilbert is currently working at Huntsman Cancer Hospital in the Blood & Marrow Transplant Program, passed the Oncology Certified Nurse exam in 2013 and will soon be applying for the DNP program at the U.

BS '93, BSN '88, Katrina Terzian Jensen, has worked for Intermountain Healthcare for the last 15 years and is currently a data manager for the Pediatric Specialty Clinical Program. Katrina is also currently serving on the Alumni Association Board of Directors where she enjoys giving back while serving the interests of the College of Nursing.



PhD '13 - Virginia LeBaron, PhD, APRN, FAANP worked as a palliative care NP for many years in Washington, D.C. and then in Tucson, AZ. While in Tucson Dr. LeBaron developed an interest in international health which led her to pursue a PhD at Utah in 2011. During her time at Utah, she received a Fulbright fellowship which funded her dissertation research work in India. She is currently pursuing a post-doctoral research fellowship at Dana-Farber Cancer Institute at Harvard Cancer Center in Boston, MA.

BSN '03 - Stephanie Erin Johnson is currently a manager at PricewaterhouseCooper's Philadelphia Office. Prior to her transition to health care consulting, she worked as a traveling Registered Nurse in many of the top U.S. medical institutions in a variety of pediatric clinical settings. Stephanie obtained her MSN with emphasis in Healthcare Administration from the University of Pennsylvania and a certificate in Human Resources from the Wharton Business School. She has been involved with implementation of clinical documentation improvement (CDI) programs and has worked on ICD-10 readiness assessments. Stephanie has advised clients on best practices for pre and post implementation of clinical and financial systems.

Vanessa Brown Laurella, PhD '96, MSN '86, BSN '80 As the director of the LiVe Well Center at Park City Medical Center, Vanessa works with patients to help them reach their optimal health. While she oversees the medical evaluation, nutritional counseling and fitness coaching, the LiVe Well Center program is more than diet and exercise. It's about living well and being healthy.



Some of Vanessa's accomplishments include: starting one of the first National Nurse Residency Programs in the State of Utah; developing and administrating the first online nursing program for associate degree nurses to earn their baccalaureate degrees at the College of Nursing and serving as the director of the College of Nursing's Graduate Nurse Administration program.

Elaine Marshall, MS '79, PhD '88 was honored on November 13, 2013 with the Merit of Honor award from the U's Alumni Association. The prestigious Merit of Honor award is given by the Emeritus Alumni Board and recognizes students who attended the University 40 or more years ago and who



have given distinguished service to their profession, the University and/or the nation.

Dr. Marshall is currently chair of the Department of Health Restorations and Care Systems Management at the University of Texas

Health Science Center in San Antonio. From 2007 until 2013, she worked as a nursing professor at Georgia Southern University, where she also has been director of the Center for Nursing Scholarship and helped launch the first interdisciplinary rural health research institute in Georgia and the Southeast region. Prior to moving to Georgia, she was a dean and professor with Brigham Young University's College of Nursing from 1988 to 2007. Her 2010 book *Transformational Leadership in Nursing: From Expert Clinician to Influential Leader* was the *American Journal of Nursing's* 2011 Book of the Year winner in the category of Leadership and Management. In 2012, she was named a Fellow with the American Academy of Nursing, one of the highest honors in the field.

Liana Martinez, BSN '85 went into the emergency care field after graduation and became a flight nurse (her dream job) in Pittsburgh, Penn. She later went back to school to become a nurse practitioner and loves it. She currently resides in Albuquerque, NM.

DNP '09 - Jody Leigh Osteyee is currently a clinical

nurse specialist in the med-surg division at Primary Children's Hospital. She is also serving as the current president of the Alumni Board of Directors (2012-2014). She recently implemented an essential oils program at Primary Children's Medical Center and has



plans to include the use of essential oils in lactation and imaging procedures. She notes that many other hospitals are considering similar programs.

Are you a graduate of the College of Nursing? The Alumni Board invites you to submit a Class Notes update so we may share your accomplishments and career highlights with the entire alumni community.

Submit your update and headshot (if available) online at www.nursing.utah.edu/alumni

Or, you may also send them to Melanie Osterud, director of advancement, at (801) 581-8919 or melanie.osterud@nurs.utah.edu.