



COMBATTING COVID-19

HOW THE COLLEGE OF NURSING COMMUNITY POWERED THE VACCINE EFFORT,
SAVED LIVES, AND FOUND HOPE DURING COVID-19'S DARKEST TIMES



Men in Nursing

Advanced Nursing Education
Workforce Program

Telemental Health

Faculty Resources and
Education Database



During the past 18 months, the world has witnessed nurses and health care personnel on the front lines caring for patients with COVID-19. They've endured demanding conditions, adapted to changing evidence, worked extra shifts, redeployed to new care environments, and facilitated patient-family communication when family visitation was not allowed.

As Dean, I have witnessed College of Nursing faculty, staff, students, alumni, and community partners demonstrate extraordinary strength and flexibility during this time, and am pleased to share highlights in this issue of **insights** magazine.

While adapting our day-to-day work to new realities, the College of Nursing community not only persevered, but surged forward and expanded care to underserved and diverse populations, innovatively educated and shaped the nursing and gerontology workforce, hosted a Commission on Collegiate Nursing Education virtual site visit for the baccalaureate and master's programs, redesigned our website, conducted timely funded research, and even commercialized a product. I salute them all.

Inspired to combat COVID-19 and its devastating impact, many from the College volunteered to administer COVID-19 vaccines to diverse populations throughout the Salt Lake Valley. Some pre-licensure students applied for a temporary registered nurse apprentice license and began working early, which alleviated staffing shortages in hospitals, clinics, long-term care facilities, and other health care settings.

I appointed Valerie Flattes, PhD, APRN, ANP-BC, as inaugural Associate Dean for Equity, Diversity, and Inclusion, demonstrating our long-term commitment to reform our priorities, take anti-racist actions, and create inclusive solutions. Our scientists are conducting community-engaged research regarding prevention and self-management of chronic diseases, as well as social needs known to improve health outcomes and promote health equity.

We will never forget the memories of the past 18 months. Although still challenged by the pandemic, I am excited by the possibilities of the upcoming year!

Marla J. de Jong

MARLA J. DE JONG, PHD, RN, CCNS, FAAN
DEAN, UNIVERSITY OF UTAH COLLEGE OF NURSING



Points of Pride

Funding

\$4,554,922

in donor funding

\$2,461,529

in student traineeships, scholarships, and fellowships

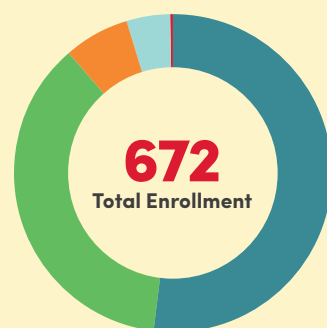
487

donors

10

endowed chairs

Students



- 350** Bachelor of Science
- 246** Doctor of Nursing Practice (DNP)
- 45** PhD
- 30** Master of Science
- 1** Dual DNP-PhD

Research

#22

National Institutes of Health (NIH) funding

\$35M

Total Grant Portfolio

Faculty Practice

Caring Connections

9,000

personal contacts through Caring Connections Grief Groups

4

COVID-19 Grief Groups and 6 COVID-19 Recovery Support Groups

Juvenile Justice Services (JJS)

25,255

health care visits for incarcerated youth

1,629

COVID-19 tests for youth, with COVID-19 positive youth being cared for in quarantine

Faculty Practice Sites

10,000+

hours of one-on-one student learning by all faculty practice sites

Urban Indian Center of Salt Lake (UIC)

2,500+

patients were tested at a UIC staff-designed drive-up COVID-19 testing kiosk

Nearly 2,300

COVID-19 vaccinations administered from January 1, 2021, to June 30, 2021, by UIC staff

BirthCare HealthCare (BCHC)

14,500

outpatient clinic visits conducted

702

births at University of Utah Hospital attended

93%

success rate of vaginal birth after cesarean section compared to 13.8% national success rate

U.S. News & World Report Rankings

#11

Nurse-Midwifery Program

#23

Doctor of Nursing Practice Program

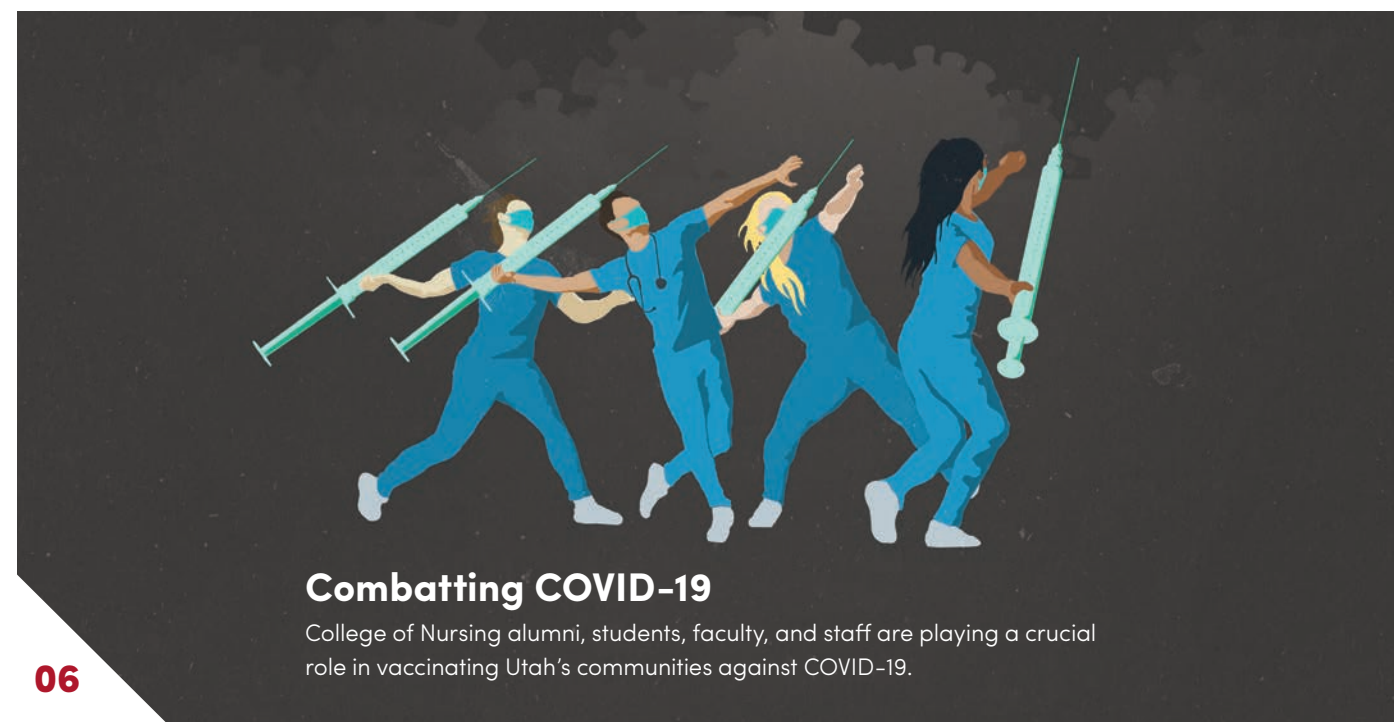
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Bachelor of Science in Nursing Program

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Online Master of Science in Nursing Program

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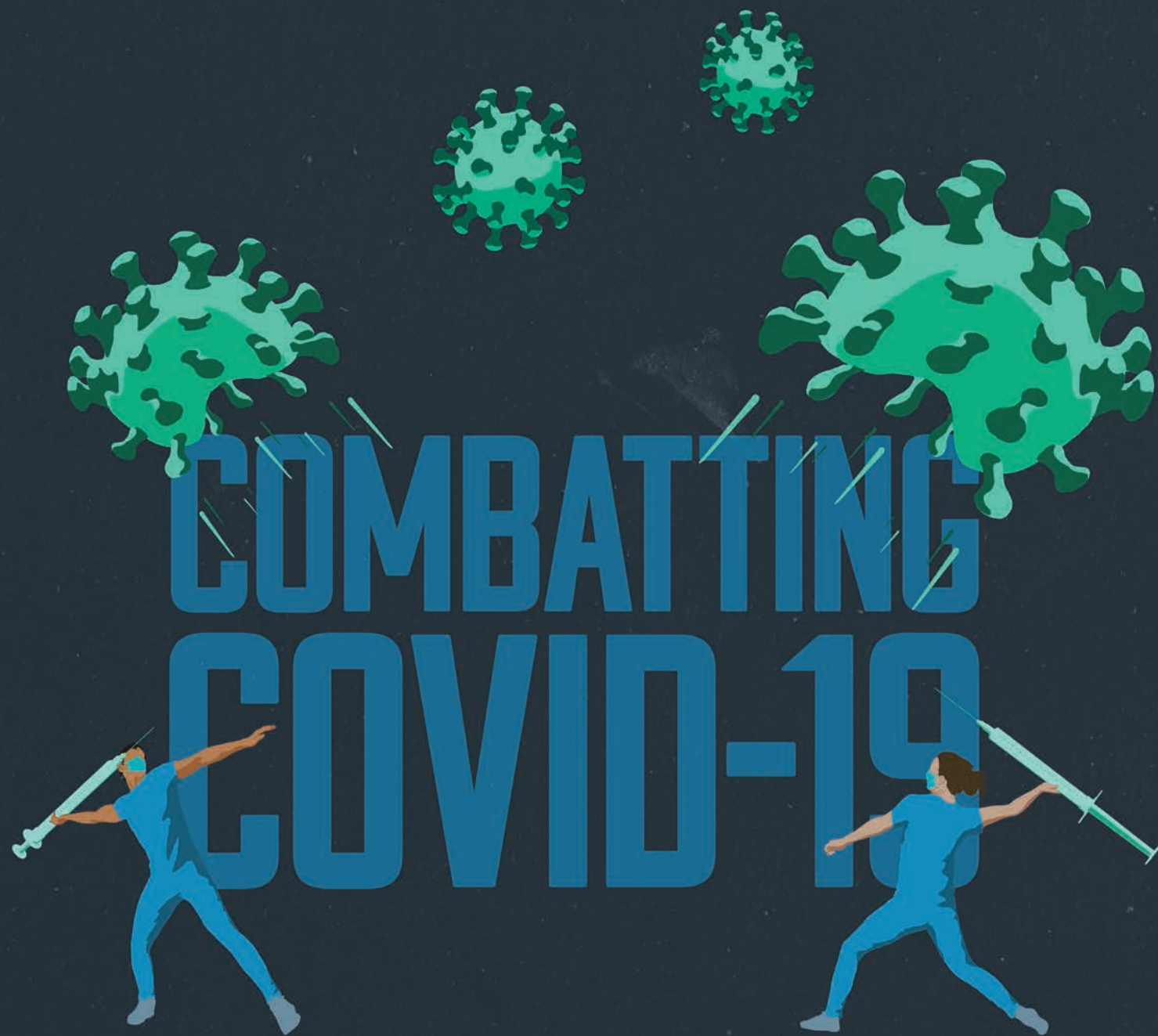
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HOW THE COLLEGE OF NURSING COMMUNITY POWERED THE VACCINE EFFORT, SAVED LIVES, AND FOUND HOPE DURING COVID-19'S DARKEST TIMES

EVERY TIME TERESA GARRETT, DNP, RN, PHNA-BC, HELD A SYRINGE DURING THE PANDEMIC, SHE FELT LIKE SHE WAS HOLDING GOLD. INSIDE THE CLEAR, THIN TUBE WAS A LIFE-SAVING COVID-19 VACCINE.



■ Teresa Garrett helped facilitate numerous COVID-19 vaccination clinics.

She and her College of Nursing (CON) colleagues knew that vaccination was the only way to stop the wave of sickness and death racing across the world. History told them so.

Garrett, an associate professor, had previously run the Utah Department of Health's communicable disease bureau during the deadly H1N1 (swine flu) pandemic, which killed about 12,000 Americans in its first year. But COVID-19 was something unique.

"You can't even really say it was H1N1 on steroids, because there aren't that many steroids in the world," she said.

So, Garrett and dozens of other CON faculty, students, and staff joined the army of volunteers across the state striving to get the vaccine in as many arms as fast as possible. As hard and horrible as the pandemic has been, it is a rewarding time to be a nurse.

When the novel flu virus H1N1 was detected in the United States in the spring of 2009, health officials were taken by surprise.

"That was scary, because it wasn't supposed to happen in our hemisphere," recalled Garrett.

All the modeling had suggested this new kind of flu would start in Asia. Instead, H1N1 appeared in North America—including Utah.

But by fall, a vaccine was available and H1N1 soon disappeared from the headlines.

With COVID-19, reaching the end of the pandemic has been more difficult. Summit County Health Department, an established faculty practice partner, needed help. So, the CON stepped up. Garrett volunteered to vaccinate and bring students with her.

"Let's go show them how we do this emergency response," she remembers thinking.

Garrett and the students stood for hours in the cold in an old movie studio across the street from the health department. Four lanes of cars passed through as vaccine after vaccine went into arms.

"People cried," Garrett remembered. "People got out of their cars and jumped for joy."

Students got to see in real time the impact they could make. Some people told Sara Wilson, then in her last semester at the CON, they hadn't left their house in a year.

For her, being a part of the solution to a public health crisis was inspiring. Many of the volunteers in Summit County were

retired physicians, nurses, and other specialists with years of medical expertise.

"I felt the camaraderie," Wilson said. "It was really cool to see people humble themselves for this—to do some common good."

By summer, as the vaccine became more available, Garrett changed her focus to on-campus vaccine clinics. Those clinics targeted students, encouraging them to "take one for the team," including athletes and marching band members.



"THE HEALTH DISPARITIES BECAME BLAZINGLY OBVIOUS WHEN COVID-19 HIT."

EMILY ROYCE

Nursing Practice DNP Student, Registered Nurse at the College of Nursing and the Urban Indian Center of Salt Lake

Garrett has heard all the concerns: the vaccine causes infertility or heart disease. Some students said it had been approved too fast. She listened and provided the facts. It's the kind of conversation so many nurses have had since COVID-19 vaccination began. It's the kind of conversation that continues as vaccination clinics take place at the student union this fall.

"How nurses engage with communities can make a difference in an entire community's health," Garrett said.

Nurses weren't just key to vaccination efforts in Utah, they were also often caring for the sickest COVID-19 patients in the hospital. CON graduate Christy Tran Mulder worked at University of Utah Hospital's Medical Intensive Care Unit during the first wave of the pandemic, and was sometimes the last person patients saw before they died.

She was also the first in the state of Utah to receive the COVID-19 vaccine, something Mulder has described as an honor.

Before the vaccine was available, Emily Royce, a DNP student and registered nurse at the CON and the Urban Indian Center of Salt Lake, was among the many providers caring for COVID-19 patients at home. She helped coordinate testing and distributed thermometers and pulse oximeters.

People were sometimes too sick to take public transportation to get medical help. Too sick to walk. Too sick to get groceries or medications. Many of her patients were uninsured and could not afford to take an ambulance. So, Royce and the Urban Indian Center referral specialist found solutions.

"The health disparities became blazingly obvious when COVID-19 hit," Royce said. "Though not all, many in this population are low income and do not have insurance—most of their work situations do not provide paid compensation for time off."

When the vaccine became available, she and the Urban Indian Center medical team worked hard to provide culturally-sensitive care. Native American music played in the background during appointments. After the shots, patients received a bag with everything from hand sanitizer to purifying sage they could burn at home.

About once a month in February, March, and April, more than 100 people received vaccinations at Saturday clinics. CON student volunteers were crucial.

"The biggest barrier with giving the vaccine wasn't the fact that there wasn't enough vaccine," Royce said. "It's that there wasn't the infrastructure or staff to provide that many vaccines. Students were the way we had the capacity to do that."

Royce, who is now studying to be a nurse practitioner, taught the students to slow down and spend that extra few minutes talking with patients and relieving their anxiety.

"I think the more transparent you are with the data the more that person is going to trust you," she said.

Chelsea Harvey was a CON student helping at the Urban Indian Center as she finished her degree. She is part Choctaw, and her grandmother is a patient at the center.

"I got to hear a lot of stories that way and learn more about the Native American side of things and how COVID-19 affected them," she said.

Giving people their COVID-19 vaccine meant giving people the ability to finally visit their family at reservations. Some people hadn't been home in a year.

"I didn't realize there were so many Native Americans in Utah," she said. "It opened my eyes to how much diversity there is in the valley."

Thanks to the pandemic, students like Harvey received a temporary registered nurse apprentice license to help alleviate a shortage of nurses. The license enabled nursing students to work in hospitals and, under the supervision of a registered nurse, care for patients at the level of their education while nurses worked with the sickest COVID-19 patients.

That was a huge learning opportunity for Harvey who had been forced to do some of her nursing training online and at home during the pandemic.



College of Nursing Alumna Christy Tran Mulder received the first COVID-19 vaccine administered in Utah.

"I GOT TO HEAR A LOT OF STORIES AND LEARN MORE ABOUT THE NATIVE AMERICAN SIDE OF THINGS AND HOW COVID-19 AFFECTED THEM."

CHELSEA HARVEY

College of Nursing Alumna, Registered Nurse

"My husband was my guinea pig for a lot of things," she said. "I would tie tourniquets on his arm and try and find veins on him because I didn't have anyone else to do that with."

Harvey's temporary license allowed her to work at the surgical trauma unit at the Intermountain Medical Center in Murray. Working under a licensed nurse's supervision, she gained experience that would lead to a job in the same unit after earning her bachelor's degree in nursing.

Working at the Urban Indian Center had given her administrative experience, too, as she helped organize the vaccination clinics.



■ Melanie Wolcott (right) vaccinated her best friend (left) at the Salt Palace.

"I think the nurses are what made a difference," she said. "People came out of the woodwork."

In the beginning, when demand was high, Wolcott was vaccinating around 100 people per day. Some of them were extremely nervous, and it was Wolcott's job to explain the vaccine's potential side effects and help some people overcome a fear of needles. Sometimes she had the opportunity to persuade another family member accompanying the patient to get the shot too.

When her best friend said she was coming to the Salt Palace to get vaccinated, Wolcott told her to ask for her table. She knew how much the vaccine meant to her friend, who was a self-employed Reiki practitioner with two young children.

"I got to give her this ability to reconnect with the world again," Wolcott said.

Her nurse practitioner colleague, Katie Ward, DNP, WHNP, knew all too well how devastating COVID-19 could be. Her 84-year-old father was living in an assisted living facility during the pandemic. He was exposed to COVID-19 walking to and from meals. Diagnosed July 8, 2020, he died three weeks later.

"He had medical problems—something was going to get him eventually—but the hard thing was that we had to let him die alone," said Ward. "It was such early days and you couldn't be there."

The pandemic alone probably would have inspired her to give vaccinations. After her father's death, she was on a mission.

"People should not lose their parents or loved ones to a vaccine-preventable illness," Ward said. Her daughter, who does not have a medical background, volunteered her computer skills. Just like in Summit County, people of all backgrounds came together to help Salt Lake County's community. Retired midwives, physicians, firefighters, and nursing students.

"It was some of the most fun I've had professionally in a long time—being part of a team," Ward said. "You kind of get why people kept coming back for more."

"I THINK THE NURSES ARE WHAT MADE A DIFFERENCE."

MELANIE WOLCOTT

Operations Manager, BirthCare HealthCare

"I learned how much work goes into setting up a vaccine clinic like that and how many people you have to coordinate with to make it run smoothly," Harvey said. "I also saw how helpful volunteers can be."

Since the pandemic began, Melanie Wolcott—like so many others—had been working from home. She'd been safely doing her job as the operations manager at BirthCare HealthCare midwifery and women's health faculty practice managing schedules and budgets, while practitioners were delivering babies in full personal protective equipment.

Wolcott, a former labor and delivery nurse with an MBA, felt a little helpless. Too safe in her bubble.

"I wanted to be part of the solution," she recalled.

So, when a friend told her about an opportunity to vaccinate the community through the Utah Medical Reserve Corps, she was ready. From January to the end of May, Wolcott was among the hundreds of volunteers—many of them nurses—who vaccinated people in Salt Lake County.

■ Katie Ward vaccinates her daughter



Ward, an associate professor at the CON, taught graduate students who, like so many others, struggled to do coursework from home during the pandemic. In many cases, their kids were attending school in the living room or kitchen with them. Some of the graduate students were working extra shifts. But, all of a sudden, their coursework seemed much more relevant.

"The pandemic really brought to life a lot of things we talk about in theory—how the public health system works or does not work, and the importance of understanding evidence," Ward said. "There's been a lot of science really brought to life."

Back in January, there were ten lanes of vaccination tents with cars queued up at the Maverik Center. Volunteers like her were injecting vaccines as fast as they could.

"It was kind of a marvel they pulled all this together," she said.

When Ward returned to get a pre-travel COVID-19 test this summer, she was heartbroken that no one was there to get a COVID-19 vaccine. All of the people were there to get tested as the Delta variant surged. Many Salt Lake County adults remain unvaccinated.

Some health clinics, like hers, now house the COVID-19 vaccine on site giving providers the chance to vaccinate someone during a regular appointment. Ward recently cared for an older, unvaccinated patient

with significant medical issues. Her husband had accompanied her to the clinic.

"I think she wanted the vaccine—he asked me what I thought," Ward said. "I told them about all the benefits of being vaccinated."

She told them getting COVID-19 was way worse than whatever they were hearing about the vaccine. Getting "natural immunity" meant risking their lives to the infection first.

The couple agreed to receive the shot, and Ward ran out of the room to make arrangements. She hugged her medical assistant with happiness. It was the first time she'd been able to convince a patient in the clinic to receive the COVID-19 vaccine. She thinks having it immediately available is a game changer.

"I've seen a lot of patients who've told me they don't want to be vaccinated," she said. "I've felt like nothing I say makes a difference."

She often does tell people about her father, because she's found that many patients don't know anyone who died or even went to the hospital.

"In their mind, it's a mild thing people recover from—and it's not a big deal," Ward said.

So, she will keep sharing her story. One patient at a time. Because COVID-19 is far from over, and every vaccine matters. ■

"IT WAS SOME OF THE MOST FUN I'VE HAD PROFESSIONALLY IN A LONG TIME—BEING PART OF A TEAM."

KATIE WARD

Associate Professor (Clinical)

Men in Nursing

More men in the United States are entering the nursing profession than ever before.

Anthony Muradas never planned to become a nurse. Growing up, he saw it as women’s work.

“Being a man in Latino culture, it’s manual labor that’s praised,” said Muradas, whose family immigrated from Mexico and Spain. “Women typically tend to do the caring.”

But when he traveled to Spain with his grandparents as a teenager, his grandmother had a stroke at a pizza parlor. It was Muradas who would spend the rest of the summer helping her recover.

“I had to step up and be a primary care provider,” he recalled. “And that’s when I fell in love with the profession.”

During those months in Spain, Muradas helped give his diabetic grandmother insulin—something he’d never done before. He made sure she showered and took her medication. When she grew frustrated, he learned to understand her point of view.

After returning to the United States, Muradas enrolled at the University of Utah and graduated from the College of Nursing (CON) in 2020. Now, it’s Muradas’ family coming to him with medical questions. The 24-year-old is very different from the scared teenage boy who didn’t know much about insulin.

“I’m kind of the go-to for not just my family but my boyfriend’s family,” he said. “Now as a nurse, I’m able to educate them.”

Unlike in the past, Muradas was not the only man in the class. Today, a growing number of men across the country are choosing to become nurses.

Between 1970 and 2020, the percentage of male registered nurses jumped from about 2.7 percent to 12.6 percent, according to the U.S. Bureau of Labor Statistics. Many men recognize nursing’s wide range of career options and potential to engage in meaningful work.

Men, like Muradas, are drawn to a profession built on caring and strength. “It’s actually very labor intensive,” Muradas told his family. “It does require a mixture of traditionally masculine and feminine traits.” In his 70 student cohort, about 10 of the students were men.

It was a very different situation when Harry Wesche walked into orientation for students interested in attending the CON in 1961. There were 71 females and one male—him—in the room.

Yet he had begun his medical training years earlier in what was then a very male-dominated world—the Air Force.

After high school, the Air Force trained him to assist doctors and nurses with initial first aid as a medical technician, a job he could do anywhere from military outpatient clinics to hospitals. After a few years, he asked himself whether he wanted to be a doctor or a nurse. There was already one nurse in the house—his wife.

But Wesche, now 84, knew that doctors didn’t have the patient contact that interested him. “There’s an old saying: ‘You were nursed back to health,’” he said. “That’s what I wanted to do.”

After Wesche graduated from the CON in 1965, his nursing career took him all over the world—and almost out of this world.

The idea was to make sure nurses could handle a high altitude or space environment if they needed to care for a patient. Wesche even had a space suit fitted just for him. None of the nurses ever had to blast off, but the training was worth it.

“It [helped us] to know what it felt like and to know what astronauts were going through, so we could mentally and physically help the astronaut,” says Wesche.

For some men, the biggest challenge to becoming a nurse is other people’s perception. A neighbor once asked Wesche: “Why don’t you go to engineering school and get a man’s job?”

“When I went into nursing, it was not considered a masculine identity,” Wesche recalled. But he knew he could be just as nurturing as a female nurse. He remembers how patients in the evening would ask for him, hoping for a back rub. His strong hands were an asset. He prided himself on keeping them soft for his work.

“If a man is interested in becoming a nurse, he should know the career has tremendous job security,” Wesche said. With a bachelor’s or higher degree, nurses have many opportunities for varied roles and promotion. His own career shows just how many things someone with a nursing degree can do. After his career in the military, he became a county epidemiologist and finally a community college instructor.

“I can’t think of a career in the world that has the diversity that nursing has,” Wesche said.

■ Harry Wesche changes an injured patient’s dressing on an Air Force aircraft, circa 1970.



“When I went into nursing, it was not considered a masculine identity.”

HARRY WESCHE
College of Nursing Alumnus,
retired Registered Nurse



■ Anthony Muradas graduated from the College of Nursing in 2020.



Lee Moss as a recent graduate in the University of Utah Hospital's burn unit, circa 1987.

During the COVID-19 pandemic, the media spotlighted "health care heroes," many of whom were nurses. There were stories about nurses managing ventilators and taking care of critically ill patients. They were also the ones holding an iPad to help dying patients talk to their family for the last time.

Lee Moss, a 1987 CON graduate, thinks that's among the many reasons the image of nursing has changed. Rather than being seen as assistants to the physician, nurses are now seen as an integral part of the health care team. That may appeal to many men now going into the field.

For Moss, nursing was a second career after several years as a seasonal forester. It was the early 1980s, and the economy

While taking classes at the CON, Moss worked as a nurse's aide at the University of Utah Hospital Resource Pool. Of all the units he worked, the burn unit was his favorite. Resource staff were treated well and he was interested in critical care.

After graduation, he landed a job at the burn unit and never left. A graduate degree as a nurse practitioner helped him push his career even further. Under his leadership, the burn center outpatient clinic grew from using the surgery clinic one afternoon a week to the permanent six room Burn Center in the University of Utah Hospital offering daily outpatient care, telemedicine, and procedures.

"That's an interesting example of what nurses can do," said Moss, 63. He's a

"You have to be empathetic and compassionate and be able to deal with people in their worst of times and best of times."

LEE MOSS

College of Nursing Alumnus, Adjunct Instructor

was in a downward spiral. He couldn't find a permanent forestry job and knew that nursing would offer a more stable life.

Though the number of nurses nationally then was not as high as it is now, the National Male Nurses Association (now the American Association for Men in Nursing) had more than 2,000 members by the late 1970s.

leader in health policy as well. As the current Co-chair of the Utah Nurse Practitioners (UNP) Legislative Committee and when serving in other leadership positions—including Chairman of UNP—he helped persuade legislators to pass laws reducing barriers for nurse practitioners to work in Utah and nationally.

He's noticed many men seem drawn to high adrenaline nursing jobs including intensive care, flight nursing, and emergency nursing.

But any nurse—of any gender—has to have certain traits.

"You have to be empathetic and compassionate and be able to deal with people in their worst of times and best of times," Moss said.

Moss, like so many other male nurses, has been mistakenly called "doctor" by patients due to cultural stereotypes, which can be particularly upsetting to female health care providers. Yet nurses can often have that title even if they didn't go to medical school.

Samuel Wang, a 30-year-old registered nurse originally from Taiwan, is currently pursuing his PhD at the CON. He says students in his previous Master of Nursing Informatics program were equally male and female.

When he's asked his classmates why they're pursuing their graduate degree, all of their answers related to income and stability. Wang was motivated to study nursing not only because of the career benefits, but because he wanted to improve the lives of others.

"I always enjoy working with people. I like to see patients get more control over their condition by applying the information that I provide them," said Wang. "I aim to empower more people by utilizing the right information and creating a more patient-centered health care system."

Wang's interest in caring for others is not unique—it is a common passion among men within the CON's community and a large reason they enter the nursing profession. Regardless of one's gender, there is always space for compassionate individuals in nursing. ■



"I always enjoy working with people. I like to see patients get more control over their condition by applying the information that I provide them."

SAMUEL WANG
PhD Student



Supply and Demand

Utah's rural communities have a shortage of health care providers. The Advanced Nursing Education Workforce program hopes to improve it.

Rural towns and cities have a supply and demand problem.

There aren't enough health care providers who live there—leaving rural residents with higher rates of death, disability, and chronic diseases.

The University of Utah College of Nursing (CON) has come up with an innovative solution that avoids the pitfalls used in the past—namely trying to entice city dwellers to relocate to a remote region by forgiving student loans and hoping they will fall in love with an unfamiliar place.

Instead, the CON has flipped the narrative—it wants to find nurses who already live in rural areas and provide them training for advanced degrees so they can stay and work within a com-

munity they already know and love. The resulting program is called ANEW, for Advanced Nursing Education Workforce program.

"One thing we thought would work better is to recruit people from rural and underserved communities," said ANEW Project Director and Associate Dean for Academic Programs Gwen Latendresse, PhD, CNM, FACNM, FAAN. "We want to keep them where they are, keep them connected to their communities, support them financially, and establish an education system that's delivered right where they are."

Funded by a four-year, \$2.8 million grant from the federal Health Resources & Services Administration, the program is expected to train 24 students, covering half their tuition for two years, plus paying up to \$40,000 each for expenses like childcare and gas, or reducing their work hours so they can study.

"We started finding those individuals who were saying, 'I would never be able to become a nurse practitioner or a nurse midwife because the University of Utah is too far away and I'm not going to move or I can't afford it,'" said Latendresse.

Trainees who complete the three-year education program earn a Doctor of Nursing Practice (DNP) degree, and learn the advanced skills needed to deliver high quality primary care in family medicine, gerontology, women's health, or nurse-midwifery.

So far, trainees have come from Cedar City, St. George, Price, Logan, Richfield, Roosevelt, and San Juan County. The program is also open to nurses in surrounding states. Many report that the grant-funded scholarships have been invaluable, allowing them the time to focus on their studies, and to become leaders who understand the needs of rural Utahns.

"As a single mom and full-time employee, this award has helped me remain in the program" said Yumi Malik, RN, BSN, who is enrolled in the women's health and nurse-midwifery dual track within the CON's DNP program.

While she grew up in an urban setting, Malik hopes to complete her residency in a rural setting. She said the rural health care class through ANEW was crucial, as was a project on tackling biases in health care. "It allowed me to see barriers, obstacles, differences, and similarities from a rural perspective compared to an underserved urban area. This is important work to reduce biases in birthing settings in rural communities and border towns."

The grant-funded scholarship allowed Elizabeth Simmons, BSN, RN, a DNP student in the family nurse practitioner track, to move and care for people in her rural hometown.



"As a single mom and full-time employee, this award has helped me remain in the program"

YUMI MALIK

Dual Women's Health and Nurse-Midwifery
DNP Student

"It has been quite magical to come back home and witness the tight connections and extreme passion among the individuals here. The scholarship provided me with the ability to begin to cultivate lasting relationships with the other providers in the area, individuals whom I will shortly be able to call my colleagues," said Simmons. "I am very excited to be working alongside these stellar care providers and to very soon become one of the individuals who can help to guide the care of local community members, neighbors, and friends."



“The scholarship provided me with the ability to begin to cultivate lasting relationships with the other providers in the area.”

ELIZABETH SIMMONS
Family Nurse Practitioner
DNP Student

“The program has been rigorous,” said BreeAnne Rowland, RN, BSN, a DNP student enrolled in the family nurse practitioner track. She’s been able to avoid debt with the grant-funded scholarship and has a firm foundation to become a rural health care provider. “The opportunities to network and meet mentors who are doing what I want to do with my career has been absolutely worth all of the extra hours I have put in.”

One barrier recruiters have had to overcome is getting rural residents to see themselves as capable of achieving an advanced degree, said Melanie Hall, a CON student success advocate. “One of the challenges is the University of Utah is in an urban setting and feels far away and abstracted from their everyday lives and goals,” she said. She helps them get over their “imposter syndrome.”

Classes are largely taken through live video conferences and online. ANEW is also helping the CON pilot the use of virtual and augmented reality, using Google Glasses—among other technology—for remote learning to train nurses in skills like suturing, placing catheters, and conducting physical exams.

The CON has joined with five clinical sites—in Sevier, Carbon, Summit, and San Juan counties, plus one in Wyoming—where trainees can complete the clinical portion of their education under the guidance of a licensed provider. Because of the primary care shortage, it’s been difficult to find preceptors. The ANEW grant aims to fix that problem as well. It helps the CON identify and train preceptors. Plus, ANEW graduates can eventually become preceptors for future trainees.

To expand the University of Utah’s reach and serve the more remote corners of Utah, the CON is helping pilot the concept of an educational hub with the Utah Navajo Health System in San Juan County’s Montezuma Creek. The CON is creating traveling trunks full of skill-building tools—pelvic, breast, and newborn models; casting materials; and resuscitation equipment—that will be used to support ANEW trainees and train local providers. “The nearest hospital is 30 minutes away, and providers at the Navajo clinic want to know how to handle emergency childbirths and respiratory emergencies,” Latendresse said.

Yikanee Sampson, MSN, RN, CDE, nursing director for the Utah Navajo Health System and DNP student in the women’s health and nurse-midwifery dual track, is piloting the Montezuma Creek educational hub concept.

my Certified Nurse-Midwife and Women’s Health Nurse Practitioner (WHNP) certifications. In San Juan County, Utah, we do not currently have a midwife or WHNP,” explained Sampson. “In rural areas, we [health care professionals] play

“In rural areas, we play several roles at once. If I’ll be paving the way for midwifery and women’s health in our area, that means the sky is the limit.”

YIKANEE SAMPSON
Dual Women’s Health and Nurse-Midwifery DNP Student

Sampson has been able to learn and practice without leaving the Navajo Nation—her home. After completing her DNP program and ANEW traineeship, Sampson plans on using her new skills to provide a greater scope of care to patients within the Utah Navajo Health System.

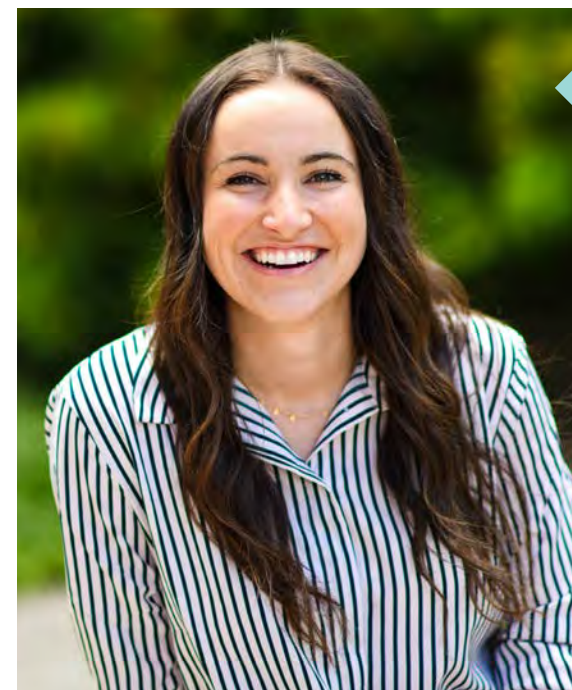
“This scholarship has helped me take courses toward obtaining

several roles at once. If I’ll be paving the way for midwifery and women’s health in our area, that means the sky is the limit as far as processes, identifying key issues, and finding solutions with external partners.”

As with everything the CON is achieving with the ANEW project, Latendresse notes, “We want to make sure it’s of use to the community.” ■

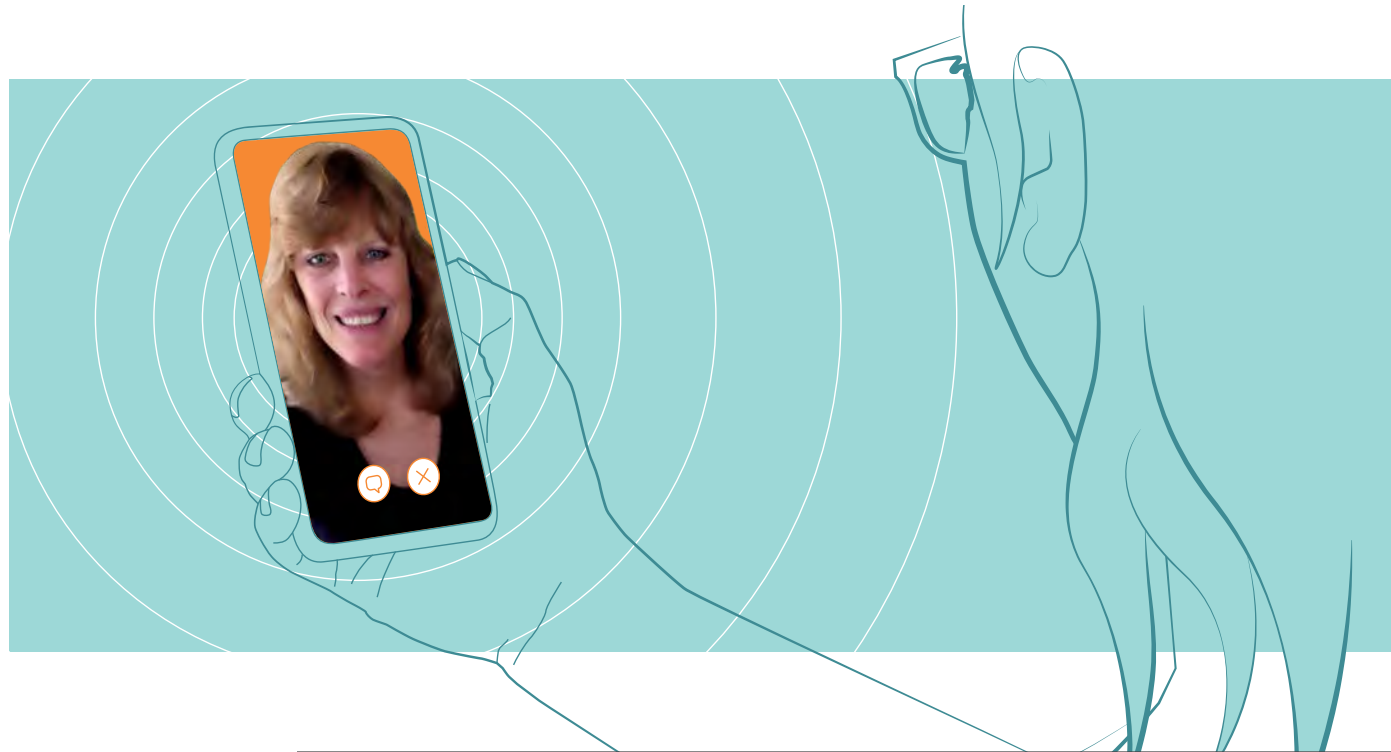


■ Yikanee Sampson (left) is poised to become San Juan County’s next Certified Nurse-Midwife and Women’s Health Nurse Practitioner.



“The opportunities to network and meet mentors who are doing what I want to do with my career has been absolutely worth all of the extra hours I have put in.”

BREEANNE ROWLAND
Family Nurse Practitioner DNP Student



■ Clinical Associate Professor Sheila Deyette (above) offers virtual appointments to her patients.

Increasing Access

The College of Nursing extends reach of behavioral health services through telemental health

When it comes to behavioral health, the patient-provider relationship has always been an important piece of the healing puzzle. In some cases, it is the most critical piece.

Over the past 18 months, the ability for mental health providers and their patients to meet in person has, at times, been impossible. This disruption threatened the traditional medium used to diagnose patients (face-to-face appointments), and interfered with the ability to create and maintain the very relationships that can facilitate long-lasting healing. That is, until telemental health services were made available to all University of Utah Health (U of U Health) patients.

Telemental health, also known as telepsychiatry, is the use of technology to provide mental health

services. It allows patients to meet with their mental health providers virtually for therapy and medication management appointments.

Telemental health dates back to the late 1950's, when it was first introduced into clinical practice by the Nebraska Psychiatric Institute. From there, it spread across the United States and into other parts of the world. Over the past 20 years, telemental health has become more common and has proven to be a vital resource for patients and caregivers.

Although telemental health services have been available for some time now at U of U Health, not all patients have had the option to meet with their provider virtually. Another barrier to mental health care in recent years has been a mental health provider shortage in the State of Utah, leaving many Utahns without the support they desperately need.

"The evolving needs in our region and across the nation has highlighted the urgency with which we need to expand our educational program for psychiatric-mental health nurse practitioners (PMHNP)," said Leissa Roberts, DNP, CNM, FACNM, clinical professor and associate dean of faculty practice. "Improving our telemental health services isn't just something we are doing as a result of the pandemic—this is something we have been working on, and we now have the ability to build on what we've already created."

Whether it's adapting to videoconferencing with patients or building curriculum to pass on valuable lessons learned to the next generation of mental health providers, faculty and staff in the College of Nursing (CON) are rallying to ease the burdens of community members by providing them with the support they need. This means increased health care access for those who live in less resource-rich areas through telemental health and other outreach initiatives.

For some, telemental health appointments can feel awkward and unproductive. But these virtual visits can be just as effective as in-person appointments, especially for persons with mental health conditions.

"When the pandemic hit, our psych-mental health nurse practitioners with the college were one of the first to offer patients virtual appointments," said Sheila Deyette, PhD, APRN, PMHCNS-BC, clinical associate professor and director of the psychiatric-mental health track within the CON's Doctor of Nursing Practice program. "And that's because we do not necessarily need medical equipment to treat patients. The relationship we build with our patients is one of the most enduring and effective therapeutic tools and sources of healing that we employ."

Deyette has been an advanced practice psychiatric mental health practitioner and psychotherapist since 1996. In addition to her administrative role at the CON, she teaches four courses educating future generations of PMHNPs. She also continues to treat patients one day per week and draws on her 25 years of experience to make the most of every appointment—be it virtual or in-person.

"You have to forget you're on camera and let yourself do what you would do if you were in

"This is something we have been working on, and we now have the ability to build on what we've already created."

LEISSA ROBERTS
Associate Dean, Faculty Practice



person,” said Deyette. “You can’t lose sight of the green dot, and you have to look into the camera so your patients can see your face and feel a connection with you. Without this, you are no longer effective. Telemental health is only successful when you don’t let it stop you from feeling close to your patients.”



“Many veterans suffer from post-traumatic stress disorder. Telemental health is an amazing tool that helps remove the barriers that prevent them from getting the help they need.”

ZOE ROBBINS
Assistant Professor (Clinical)

Zoe Robbins, DNP, PMHNP, is a clinical assistant professor in the CON and has been a champion for telemental health for the past four years.

Robbins worked her clinical hours at the George E. Wahlen Department of Veterans Affairs from 2018 to 2019, providing counseling and medication management support to veterans across the United States. This experience has made her even more committed to helping build the telemental health program.

“Many veterans suffer from post-traumatic stress disorder, and this can make even small things—like leaving the house—very difficult,” said Robbins. “Telemental health is an amazing tool that helps remove the barriers that prevent them from getting the help they need.”

In addition to her work in the CON, Robbins is the advisory council chair for the Utah Telehealth Network. She also facilitates telehealth simulations for the Interprofessional Education Program, which provides clinical experience and simulation-based training for students in the University of Utah Colleges of Health, Nursing, Pharmacy, and Social Work, and the Schools of Dentistry and Medicine. The goal of these simulations is to train students in connecting with their patients, and other providers, through the medium of telehealth.

Robbins is also creating classroom curriculum that will teach best practices in telemental health.

“There are a lot of well-established telehealth best practices,” said Robbins. “What about telemental health? How do you manage a suicidal patient virtually? How do you know if patients are even benefitting from a virtual visit? This is the kind of training our students need.”

Although Robbins is a huge advocate for telehealth and telemental health, she knows it has its limitations.

“I believe telemental health should be supplemental care, if at all possible,” said Robbins. “I believe in seeing people in a face-to-face setting, because some of that connection is lost in telemental health. However, there are many cases where your only option—or your best option—is virtual care, especially in rural areas. Our best way to serve those is to be accessible virtually, and to give our students the training they need to be the best possible mental health practitioners.”

has cut down on my travel time and is the best thing for me right now. I’ve had other providers who don’t provide the telehealth option, and it’s such a disappointment to lose that option.”

Providers can also enjoy better work life balance.

“Rather than spending time driving across the valley to different clinics, our providers can work from their home or office space and see more patients,”

“Telemental health is only successful when you don’t let it stop you from feeling close to your patients.”

LEISSA ROBERTS
Associate Dean, Faculty Practice

While meeting face-to-face is the gold standard when it comes to health care, telemental health brings a lot of benefits to both the patient and the provider.

Things that usually prevent patients from showing up to their appointments—mobility challenges, anxiety, lack of transportation, lack of child-care—are no longer barriers when meeting virtually.

For one patient, being able to skip the long drive to Salt Lake City, while still getting to see her provider on a regular basis, has been invaluable.

“It’s so great to have the option to meet with my provider virtually,” she said. “Although it’s not as good as getting to visit with her in person, it’s so nice to have the option to see her virtually. It

said Roberts. “Not only can they spend more time with their patients, but they can also reach even more patients who are in rural and underserved areas of the state.”

Another benefit of telemental health is the ability to provide virtual appointment times beyond traditional work hours.

“Although telemental health removes many barriers, we know it also creates some,” said Roberts. “Not every patient has reliable internet access, or a device with the ability to join a video call with their provider.”

While telemental health may not be the silver bullet for every situation, it is helping more Utahns get the mental health support that they need. The

CON has also started work on several initiatives to improve the mental health of even more community members.

Clinical faculty members at the CON provide care at Impact Mental Health, a clinic for uninsured patients dealing with chronic mental illness.

“This clinic is an interprofessional collaborative practice arena where social workers, psychiatrists, and PMHNP faculty members come together to serve our community,” said Roberts. “We always have at least two students at this clinic, which is a great place for them to hone the skills they need to be effective mental health professionals.”

In September, the college began partnering with the Utah Pride Center to provide PMHNP services.

“We are so excited about our community partnerships,” said Roberts. “We will have a mental health professional on site to provide counseling and medication management support. Some community members may not feel comfortable going to a regular health care provider, and some may not have a provider.”

In addition to these two clinics, the CON plans to continue developing community partnerships with additional mental health clinics across Utah to help increase access to behavioral health services for those living in rural communities. ■

Meet FRED

FRED is streamlining faculty and staff workflow

Sarah Brown is sincere when she says that FRED, the College of Nursing’s Faculty Resources and Education Database, is the “one source of truth.”

The web-based platform tracks more than 100 nursing and gerontology courses; the nearly 900 students taking those classes, and if they are on track for graduation; and the clinical, research, and teaching assignments for 136 CON faculty members.

Brown, as the academic programs information coordinator, uses the system to ensure instructors are available to teach courses they’ve been assigned, adjust students’ courses of study when necessary, build each semester’s course schedule, track which classes are offered in person or online, and even assign teaching assistants—after first searching FRED to ensure that they previously took the course and don’t have scheduling conflicts.

“When I say we’re trying to make this the one source of truth for the College of Nursing, it’s an ambitious statement but also a true statement,” says Brown.

Brown is part of the team, along with Brent Vawdrey, data and information management admin-

istrator, and Eric Kenney, former applications manager, who created FRED from scratch. They are also working with Summit Venture Studio through the University of Utah’s PIVOT Center to commercialize the database to sell it to other colleges and universities.

“We couldn’t find any existing product for what we needed FRED to do,” says Vawdrey.

The team started building FRED in 2019 and launched it in March 2021. Previously, the CON used a legacy system, but the person who built it didn’t leave the passwords or sufficient documentation, and Vawdrey said staff were unable to use many of its functions.

“We needed to have something new in place that could meet our current needs, and that could also be flexible enough to meet changing needs,” explains Vawdrey.

The team built the new database on Salesforce, a customer relationship management platform. They interviewed users of the legacy



“We couldn’t find any existing product for what we needed FRED to do.”

BRENT VAWDREY
Data and Information Management Administrator

database, including division chairs, before diving in. Ultimately, they automated the process by which division chairs inform faculty about their work assignments, made it easier for division chairs to determine that they assigned an appropriate number of faculty to teach classes, and created a new function that enables users to export course, faculty, and student data into searchable files.

“FRED is useful because it takes into account the complexity of managing schedules for nursing faculty—who have constantly shifting workloads,” says Andrea Wallace, PhD, RN, FAAN, associate dean for research. “Everyone’s their own pie chart. If you’ve seen one faculty workload, you’ve seen one faculty workload.”

That’s because several faculty could be teaching one clinical course together, and research grants have different timetables than an academic year. “It’s allowed us to communicate better with each faculty member and add transparency to the whole process,” Wallace says.

Lauri Linder, PhD, APRN, CPON, an associate professor and chair of the Division of Acute and Chronic Care, says FRED allows her to easily estimate the faculty work effort per class based on credit hours and anticipated enrollment. “It’s a fairly facile system.”

Terri Pianka, director of the Emma Eccles Jones Nursing Research Center, appreciates being able to track funded research effort monthly so that faculty receive credit on a timely basis. She can add notes, view historical faculty effort information, and message division chairs—all tasks she couldn’t do with the legacy system.

“It really has modernized how we are able to track very complicated information on a timely basis,” says Pianka.

The team behind FRED promises it will only get better—they continue to brainstorm ways to add more user-friendly functions. ■



■ Andrea Wallace is one of FRED’s most frequent users.

“When I say we’re trying to make this the one source of truth for the College of Nursing, it’s an ambitious statement but also a true statement.”

SARAH BROWN
Academic Programs Information Coordinator

Our Commitment to Equity, Diversity, and Inclusion

Valerie Flattes, PhD, APRN, ANP-BC, appointed the inaugural associate dean for equity, diversity, and inclusion (EDI) at the University of Utah College of Nursing (CON).

The new leadership position of associate dean for EDI was developed to provide collaborative, strategic, and results-oriented leadership for CON-wide EDI efforts, and assimilate the tenets of EDI into the CON's culture.

"This appointment demonstrates the CON's long-term commitment toward becoming a more diverse, equitable, and inclusive college," says Marla De Jong, PhD, RN, CCNS, FAAN, dean of the CON. "Flattes brings his-torical knowledge and years of service to the college, university, and community, and is poised to inspire the college to reach new heights."

Flattes, recognized for her dedication to cul-tural awareness and equitable patient care, served as a career line faculty member at the CON for 17 years. She possesses a range of clinical experiences, working with diverse populations across the United States. She collaborates with college, university, and state organizations to promote health equity.

In her new role, Flattes will lead initiatives to integrate equity, diversity, and inclusion into college culture, including academic pro-grams; research and scholarship; clinical practice; recruitment and retention of stu-dents, staff, and faculty; hiring and promo-tion practices; and community engagement. She will advise CON curriculum committees,

develop and mentor diverse students and faculty, and optimize initiatives that support the belonging and success of all members of the CON.

"The voices of underrepresented health sciences members need to be heard. The University of Utah is in a critical place with regards to developing a needed plan of ac-tion that fosters breaking down the systemic barriers for equity and inclusion for all of its members," says Flattes. "The time has come to act on what we have developed over the past several years so that all faculty, staff, and students feel that they are welcome and included in the university community." ■



■ Valerie Flattes examines a patient at the Maliheh Free Clinic.

Stephanie Gire

On February 8, 2021, the College of Nursing (CON) lost a valued member of its community.

Stephanie "Stevi" Gire, MS, RN, CHSE, was clinical instructor, teaching the simulation component of numerous CON baccalaureate and doctoral courses. Gire was a staple within the CON Simulation Center—she facilitated simulation learning, mentored students, and coordinated simulation training for communi-ty-based groups. She was instrumental in founding the Utah Simulation Coalition, and worked tirelessly to develop and offer simulation training through-out Utah as service to the nursing profession. Gire's passion for simulation led her to deliver peer-re-viewed simulation presentations, attend numerous health care and simulation conferences, and serve on many national and state education and simulation committees. A true champion for quality health care, Gire's work focused on enabling health care providers to efficiently acquire knowledge and skills, develop communication and teamwork competencies, and deliver safe patient care. ■



Scan to contribute to the Stevi Gire Memorial Endowed Scholarship for Nursing Students



Memory Lane

The University of Utah College of Nursing (CON) is gearing up to celebrate its 75th Anniversary in 2023. To kick off the festivities, we asked alumni from each decade to tell us their favorite memory from their time at the CON.



Do you have a memory to share? Scan the QR code to submit your story!

50s

Ansilene Ozberkmen

BS '57

LIVE and Learn

She was tough. She was gruff. Our class feared her!

She was our instructor for OR Nursing.

She introduced us to the supply room by quickly flipping open and shut the cupboards and drawers.

Then she asked, "Where are the gloves? Where are the sponges and syringes?"

No answer. Nobody knew.

Did we look, see, understand, and know anything?

This is serious!

When we became seniors, we elected her our class advisor.

We got the best advise ever!

60s

Alene Russon

BS '62, MS '85

My best memories are the great friendships of a group that has remained today.

Great experiences with patient care at the "Old County Hospital." I also love to think of all the things we had to do that are history today—cleaning our syringes and needles, putting trays together ourselves, iron lungs, and so on. Charting was far different then. Several outstanding faculty who taught us well and also gave us some chuckles. Can't leave out fun at the Busy Bee when we had a break.

70s

Angela Deneris

BS '75, MS '81, PhD '87

At the time, there weren't any midwifery practices in Salt Lake City for students to get hands-on experience, so we did prenatal clinics and deliveries at Hill Air Force Base and in Shiprock, New Mexico in the Navajo Nation. My fondest memory of the midwifery program was going to Shiprock. I had never been to a reservation, and the first day was an eye-opener. The midwifery practice at Shiprock was completely dedicated to Navajo peoples, and we provided care in basic conditions. I feel I learned more from them than they received from me.

80s

David Kutzler

MS '80

I became interested in midwifery as a senior in nursing. I explored lots of programs, but landed on the CON. At the time, there were few openings in the program, but I was fortunate to be selected. The one memory that stands out to me is that everyone was so accepting of me as a male in a female prominent career—especially in midwifery. It didn't make a difference that I was a male!

90s

Larry Garrett
BS '93

I come from a blue-collar background and had an opportunity to choose a career in nursing. What I remember from my time at the CON is the closeness of students. We developed close friendships and were supportive of one another. The faculty and instructors were always willing to do whatever they could to help us get through school. As a returning faculty member, I still sense that same energetic support and care amongst students and faculty!

00s

SueAnn Ingersoll
BS '00

My days as a nursing student were a fun and unique time in my life. I vividly remember the stark contrast of the anticipation on the first day with all the unknowns, then bookended with the excitement of graduation as our group entered the workforce to achieve our goals. Our various clinicals are among my favorite memories. Those days could be long and awkward, but also powerful. We all supported each other through laughter and tears as we practiced and experienced the world of nursing together.

10s

Nancy Madsen
MS '13

Widowed at 53 years of age, I knew I needed to figure out how to support myself for the rest of my life. I decided to return to college as a non-traditional student where I completed an undergraduate degree at Brigham Young University and a Master of Science in Gerontology at the CON. It is my master's degree and subsequent licensure as a social service worker that prepared me for my career as a program manager for the Utah Department of Human Services, Aging & Adult Services. Coming full circle, I have had wonderful opportunities to partner with the CON on multiple grants and projects.

20s

Chloe Cook
BS '21

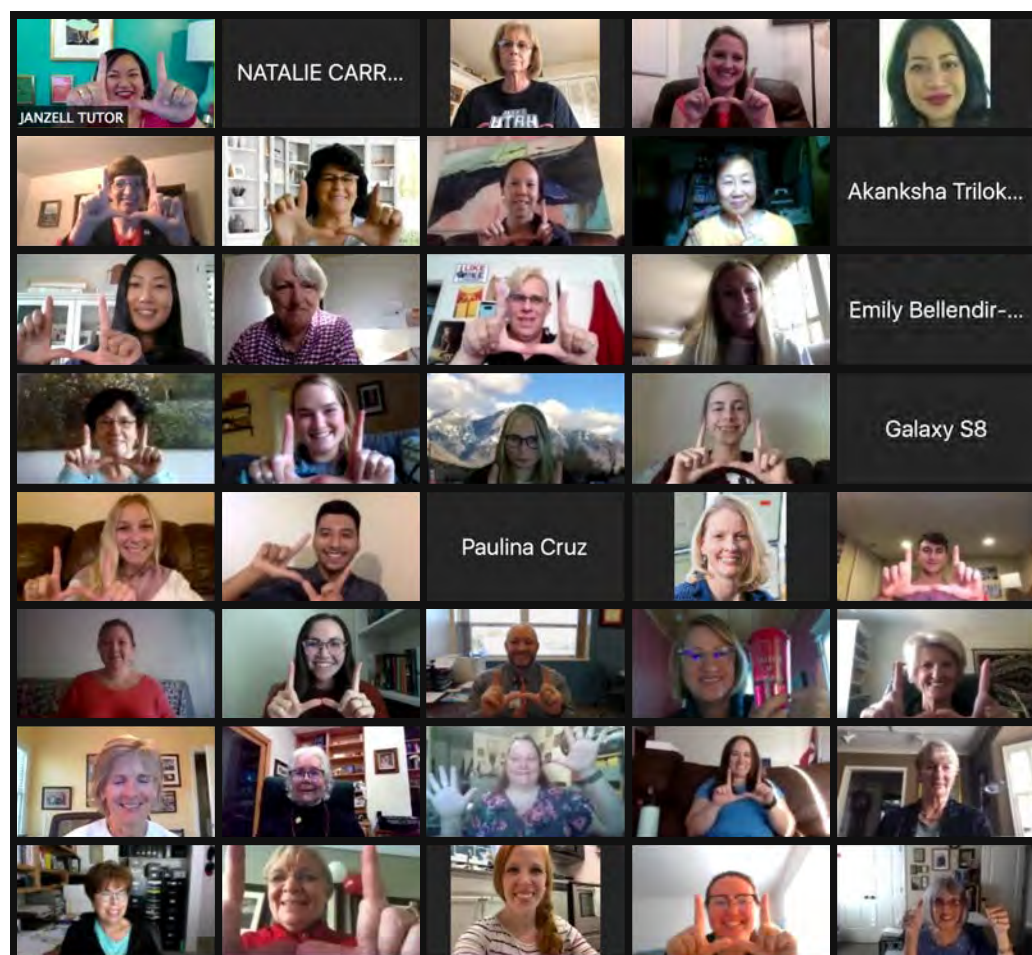
My best memories while at the CON were in the Simulation Center. I remember walking out of my advanced simulation course after the pediatric simulation section and being able to picture myself as a registered nurse. It was a moment of clarity for me. The simulations felt real—they allowed me to think critically and put everything I had learned into action. Thanks to the Simulation Center, I was able to get a sense of my future as the pediatric nurse I now am.



Alumni Weekend 2020

Due to COVID-19, the College of Nursing (CON) celebrated Alumni Weekend 2020 virtually. The CON recognized nurse leaders throughout Utah for their work during COVID-19, inducted alumni from the class of 1970 into the Half Century Society, and fostered celebration by sending an Office of Advancement “party in a box” to each participant.

On October 15, 2020, alumni from the Class of 1970 were inducted into the Half Century Society along with three alumni from other class years.



Recognizing Nurse Leaders

Behind every team of frontline health care professionals, there are administrators, managers, and team leaders who quietly serve behind the scenes. These unsung heroes keep health systems running smoothly, ensure patients receive excellent care, and advocate for equitable public health.

The College of Nursing recognizes the following nurse leaders for their crucial role in health care:



Sharon Dingman

President,
Utah Nurses Association



Amy Hartman

Founder and Chief Executive Officer,
Solstice Home Health, Hospice, & Palliative Care



Chris Johnson

Chief Nursing Officer,
Davis Hospital and Medical Center



Tracey Nixon

Chief Nursing Officer,
University of Utah Health



Susan Robel

Senior Vice President, Clinical Operations,
and Chief Nursing Executive,
Intermountain Healthcare



Jennifer Wagenaar

Chief Nursing Executive,
HCA Healthcare—MountainStar

Paying it Forward

Nanci and Charles “Charlie” McLeskey are passionate about supporting the next generation of health professionals through the Nanci S. and Charles H. McLeskey Endowed Scholarship.



College of Nursing (CON) Clinical Associate Professor Nanci McLeskey, DNP, MCG, MDiv, RN-BC, CHPN, FNGNA, always wanted to be a nurse. Coming from humble beginnings, Nanci followed in her and her mother’s shared dream of nursing.

“As a little girl, I always dreamed of being a nurse. I loved caring for people and pets, and this instilled in me a great desire to pursue this career,” says Nanci. “My mom also had a great desire to be a nurse growing up, but her dad died when she was 16 years old—she needed to be there for her mother and wasn’t able to afford nursing school.”

Nanci met her husband Charlie McLeskey, MD, vice president of Movantik Global Affairs for Redhill Biopharma, while she was attending

nursing school and he was attending medical school to become an anesthesiologist. Among other interests, Nanci and Charlie bonded over their passion for health sciences, which remains an important part of their lives.

After following academic career opportunities across seven states, the McLeskeys settled down in Salt Lake City in 2006, where they enjoy their respective careers and connecting with their two children and four grandchildren. “One of the things Nanci and I both admire about Salt Lake City is the quality health care we receive across a variety of departments at University of Utah Health,” says Charlie.

As advocates for quality health care, the McLeskeys are paying their success forward by providing support to a health sciences student at the CON through the Nanci S. and Charles H. McLeskey Endowed Scholarship. Nanci is passionate about gerontology, and is a Distinguished Educator in Gerontological Nursing. She therefore extended the scholarship to be awarded to a graduate student who plans to become a geriatric nurse or a Master of Science in Gerontology student.

“Working as a bedside nurse and through my relationship with my grandmother, I became drawn to geriatric patients,” says Nanci. “It is a great joy for me to introduce students to geriatric nursing. I strive to broaden the education of future nurses and others so they better understand the complexity and beauty of caring for this amazing population, especially those who suffer from dementia and those who are at end-of-life.”

The endowed scholarship will provide support to a CON student who is in a similar situation to Nanci’s—passionate about caring for others, but facing financial adversity that may stunt their dreams.

“I was brought up by hard-working parents who made ends meet but for whom college wasn’t an option. I have been fortunate to receive scholarships, enabling me to obtain a Bachelor of Science in Nursing degree, two master’s degrees, a teaching nursing post-master’s certificate, and a Doctor of Nursing Practice degree,” says Nanci. “I’m not sure how I would have afforded all these opportunities and degrees without the help of scholarships. This is why I want to give other students a similar opportunity to help them fulfill their professional dreams.” ■



■ A young Nanci McLeskey dressed up as her future profession.

— Legacy Donor —

Gary Rodgers and E. Christina Filtz

Gary Rodgers was a first-generation college student. Now, he and wife E. Christina “Chris” Filtz are providing support to first-generation nursing students.

Gary and Chris are the children of working-class, Great Depression and World War II families. Receiving a college education in the 1960s enabled Chris, Gary, and their families to see the world, engage in fulfilling work, and achieve financial security. Without the help of academic scholarships, their education and lifestyle would not have been certain.

As advocates for higher education, the pair have donated to the College of Nursing (CON) many times. Additionally, Gary has extended support by mentoring a pre-nursing student who is a first-generation college attendee and Somali refugee. In 2020, Gary and Chris formalized their relationship with the CON through the Gary W. Rodgers and E. Christina Filtz Endowed Scholarship.

Gary and Chris understand the crucial role that nurses play in health systems, and aim to bolster their academic success. “Nurses are the first people you meet when entering a health care facility, the people you see most often there, and the people who are on call for you 24 hours a day,” the pair say. “Nurses are also the most likely to come from working class families and be the first in their family to attend college.”

“We hope that our scholarship will help future CON deans provide a helping hand to first-generation nursing students who would not otherwise be able to enter or complete the CON’s nursing program,” say Gary and Chris.

To learn more about establishing a legacy gift, contact Director of Advancement Eden Bennett at:

eden.bennett@nurs.utah.edu, or
(801) 581-8143.



Retirements



Margaret Clayton, PhD, FNP-BC, FAAN

- Professor

- + Bachelor of Science in Nursing, University of Connecticut
- + Master of Science in Nursing, FNP, Pace University
- + PhD in Nursing, University of North Carolina at Chapel Hill
- + Post-Doctoral Fellowship in Nursing, University of North Carolina at Chapel Hill

Margaret Clayton was appointed to the College of Nursing (CON) as assistant professor in 2005, and promoted to professor in 2017. Additionally, she was an adjunct professor in the University of Utah Department of Communication, and an investigator at the Huntsman Cancer Institute. As an interdisciplinary nursing scholar, Clayton’s research integrated nursing and communication science to inform understanding of the vital role communication plays in cancer survivorship through end-of-life. Clayton held multiple roles in the CON, including assistant dean for the PhD program. She served on the executive committee for the CON’s distance post-doctoral program, and chaired numerous College committees. Clayton was deeply engaged in the highest levels of university faculty leadership, serving as member of the Presidential Anti-Racism Task Force, Presidential Search Committee, Safe U Planning Committee, Graduate Education Strategy Group, to name a few; and culminating in her election as president of the University of Utah Academic Senate—the second nurse in 103 years to hold this position. Nationally, Clayton is a long-standing leader and mentor in the National Communication Association (Health Communication Division) and the Oncology Nursing Society’s Scientific and Research Advocacy Advisory Panel, and was a charter member and chair of a Patient-Centered Outcomes Research Institute advisory panel.



“Walking into the College of Nursing always gave me great joy, and it was at the college that I found my professional home. The spirit of curiosity, generosity, and collegiality among my College of Nursing colleagues is something I shall always cherish.”



Ann Hutton, PhD, APRN

- Assistant Professor (Clinical)

- + Bachelor of Science in Nursing, Stanford University
- + Master of Science in Psychiatric Nursing, University of Utah
- + PhD in Health Psychology, University of Utah

Ann Hutton worked at the University of Utah College of Nursing (CON) for an astounding 52 years, and remarks that her retirement is overdue. After completing her master’s degree in 1969, Hutton was invited to become a faculty member at the CON. Her employment was on a trial basis with the proviso that she could maintain a faculty practice—it wasn’t the norm for faculty at the time. Her primary career interest was investigating mental health. Early in her career, Hutton participated in research projects that sparked her interest in the relationship between mental health and family dynamics for patients who had a heart attack. During the past five years, she helped conduct research regarding perinatal depression and complicated grief. An advocate for advancing the field of nursing and transforming mental health care, Hutton chaired or served on nearly all CON committees, was a member of several health sciences and university committees, and consulted for hospitals, community services, and law firms. She was president for the Utah Chapter of the American Foundation for Suicide Prevention (AFSP) for four years, and, since 1997, has facilitated Caring Connections support groups for those affected by suicide loss and survival. Hutton taught undergraduate and graduate psychiatric/mental health nursing courses, directed the psychiatric/mental health track from 1991–2006, and maintained a faculty practice of psychotherapy.



“When I chose to specialize in psychiatric-mental health nursing, it was the most under-selected specialty in nursing—that is no longer true. While we still have stigma to overcome, without mental health there is no physical health. Thank you to the College of Nursing and my colleagues—past and present—for working with me to provide the support, education, and research that furthers the development of true holistic nursing.”

Continued on Page 38 >

Retirements (Continued from page 37)



Connie Madden, PhD, RN

- Assistant Dean for the Baccalaureate Program and Student Services
- Associate Professor (Clinical)

- + Bachelor of Science in Nursing, Idaho State University
- + Master of Science in Nursing, University of Utah
- + Graduate Certificate in Gerontology, University of Utah
- + PhD in Nursing, University of Utah

Connie Madden joined the University of Utah College of Nursing (CON) in 1999 as a clinical instructor. She served in a variety of roles, most recently as the assistant dean for the baccalaureate program and student services. She taught numerous undergraduate nursing, graduate nursing education, and interprofessional education courses; and focused her research and scholarship on improving care for older adults, training and supporting health care students and caregivers regarding long-term care, and training students and registered nurses from rural and underserved areas of Utah to be leaders of community-based primary care teams. Madden helped shape the CON's academic programs, leading curriculum reform and shifting to a concept-based curriculum model. Passionate about improving the collegiate experience for students, and increasing the accessibility of CON programs, she implemented the Nursing Early Assurance Program, instituted the Express Pathway partnership with Salt Lake Community College, expanded enrollment in the pre-licensure track, and revised the baccalaureate admission process to include a holistic review of applications. Madden was integral to establishing the state-of-the-art CON Simulation Center, serving as director of simulation programs for 3.5 years and integrating robust simulation learning into the pre-licensure track.



"I have loved every aspect of my work in the College of Nursing. I can't imagine what could be more rewarding than what I have been so fortunate to be able to do in the college—work with brilliant and compassionate colleagues whose goal is to provide the best education possible to our future nurses."



Leissa Roberts, DNP, CNM, FACNM

- Associate Dean, Faculty Practice
- Professor (Clinical)

- + Bachelor of Science in Nursing, University of Wyoming
- + Master of Science in Nurse-Midwifery, University of Utah
- + Doctor of Nursing Practice, University of Utah

Leissa Roberts has been affiliated with University of Utah academic health sciences for 28 years. She began her career at the University of Utah in 1993 as a full-scope certified nurse-midwife (CNM). After many years of delivering babies, Roberts assumed leadership of BirthCare HealthCare, a leading-edge midwifery and women's health faculty practice. Culminating as associate dean for faculty practice, Roberts has led the CON's faculty practices for more than 25 years, during which advanced practice registered nurses and CNMs have delivered evidence-based, patient-centered, and high-quality care. The practices have improved access to care for patients in medically underserved and rural communities, while generating revenue for the college. She has also maintained an active clinical practice as a CNM. Roberts was instrumental in developing the Coping With Labor Algorithm, a labor assessment tool she and colleagues designed to replace the 0-10 numeric rating scale for labor pain. The Coping With Labor Algorithm is used widely by hospital systems across the United States and within international health systems. In 2016, Roberts received the Distinguished Alumni Award from the University of Wyoming Fay W. Whitney School of Nursing.



"The University of Utah has been my home since 1991 when I was a master's student. Joining the College of Nursing faculty in July of 1993 was a truly exciting time for me, and the ensuing 28 years has been filled with amazing friendships, colleagues, and accomplishments."

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Retirements (Continued from page 39)



Barbara Wilson, PhD, RNC-BC, FAAN

• Associate Professor

- + Associate of Science in Nursing, Weber State University
- + Bachelor of Science in Nursing, University of Utah
- + Master of Science in Nursing, Brigham Young University
- + PhD in Nursing, University of Arizona



Barbara Wilson has been a nurse for more than 40 years. She served in a variety of leadership positions at Intermountain Healthcare, Dignity Health/Catholic Healthcare West, Arizona State University College of Nursing, Arizona State University School of Biomedical Informatics, and the University of Utah College of Nursing (CON). Wilson started at the CON in 2012 as the associate dean of academic programs, before assuming the role of interim dean from 2018-2020. The CON achieved many milestones during Wilson's tenure as interim dean—it reactivated the pediatric primary care DNP specialty track, launched the dual DNP/PhD program, implemented reduced tuition for the RN-BS track, increased enrollment in the pre-licensure track, and introduced the post-master's certificate in psychiatric/mental health. Further, the American Association of Colleges of Nursing awarded the *Exemplary Academic-Practice Partnership Award* to the CON for its partnership with the Department of Health, Division of Juvenile Justice. Notably, she developed four DNP courses about organizational leadership and management; program planning, management, and evaluation; advanced management; and health care finance and budgeting for organizational leaders.

"I cherish the opportunities I had while serving the CON during the past nine years. What a privilege to work with staff, faculty, and board members who are committed to the advancement of nursing, the education of future leaders, and the delivery of exceptional health care through faculty practice. As we continue to gain national prominence under the direction of Dean De Jong, the future remains bright for Utah's flagship nursing institution."

Faculty Appointments



Lisa A. Barry, MBA, BSN, RN

+ Instructor (Clinical)

Lisa Barry graduated with a Bachelor of Science in Nursing degree from Weber State University in 1999, and with a Master of Business Administration degree with a post-graduate Certificate in Health Administration in 2004. Barry later completed a post-graduate Certificate in Nursing Education at the

University of Utah (U of U) College of Nursing (CON) in 2009. She is currently a PhD candidate at the CON. Barry has worked as a nurse educator and adjunct faculty member at the CON for the past nine years, and aims to develop educational strategies that advance new nurses.



Diane Chapman, DNP, APRN, FNP-C

+ Assistant Professor (Clinical)

Diane Chapman earned her Bachelor of Science in Nursing degree ('09) and Doctor of Nursing Practice degree ('15) from the CON. Since graduation, she has been practicing as a family nurse practitioner at St. Mark's Family Medicine, where she cares for a

diverse group of patients with a special focus on immigrant and refugee populations. Chapman has been teaching as an adjunct faculty member at the U of U since 2017. She primarily teaches courses in the Doctor of Nursing Practice programs, including pathophysiology, pharmacology, practicum.



Larry Garrett, PhD, MPH, RN

+ Assistant Professor (Clinical)

Larry Garrett holds a Bachelor of Science in Nursing degree from the CON, a Bachelor of Science in Behavioral Science and Health degree and a Master of Public Health degree from the U of U, and a PhD in Interdisciplinary Health Science from Western Michigan University. Garrett's employment experiences

have varied across the health care spectrum. He has served as an epidemic intelligence service officer at the Centers for Disease Control and Prevention, a business owner developing software solutions for public health, and as a health care consultant in a variety of industries.

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Faculty Appointments (Continued from page 41)



Kristy Gauthier, MS, RN

+ Instructor (Clinical)

Kristy Gauthier graduated with an Associate Degree in Nursing from Pacific Union College in 2003. She is a two-time alumna of the CON, receiving her Bachelor of Science in Nursing degree in 2007, and her Master of Science in Nursing Education degree in 2018. As a new nurse

at U of U Health, Gauthier participated in the Critical Care Internship in 2004. During this internship, she discovered her love for burn care, and has been a burn nurse ever since. She was the educator for the U of U Health Burn Unit from 2010–2020. Gauthier is now the undergraduate simulation facilitator and educator at the CON.



Julie Gee, PhD, RN

+ Associate Professor (Clinical)

Julie Gee holds a Bachelor of Science in Nursing degree from Montana State University, a Master of Science in Nursing Education degree from Regis University, and a PhD in Nursing Science degree with an emphasis in vulnerable populations from New Mexico State University. Gee has worked in a variety of health care settings and

has taught at a handful of academic institutions across several states. She serves on multiple state and community boards that advance nursing, promote health equity, and improve patient and community outcomes. Gee's primary research interest is partnering with the Lakota-Sioux people to advance health outcomes and equity.



Liz Greene, DNP, APRN, PMHNP-BC

+ Assistant Professor (Clinical)

Liz Greene is a board certified psychiatric-mental health nurse practitioner with over ten years of experience in psychiatric nursing. She has worked in a variety of settings including adolescent/young adult residential treatment centers, general outpatient clinics, women's mental health programs, and community mental health clinics.

Greene completed her Associate of Science in Nursing at Weber State University in 2011, her Bachelor of Science in Nursing at Western Governors University in 2015, and her Doctor of Nursing Practice degree with an emphasis in psychiatric-mental health from the CON in 2018.



Shinduk Lee, DrPH, MSPH

+ Assistant Professor

Shinduk Lee most recently served as a postdoctoral research associate at the Texas A&M Center for Population Health and Aging. Her research interests span the implementation, translation, and evaluation of disease prevention and health promotion programs for community-dwelling middle-aged and older adults. Her long-term goal is to expand the understanding of behavior change

among older adults, role of aging in society, and how interventions can be widely scaled and sustained to enhance healthy aging at the population level. Lee received her doctoral degree in health promotion and community health sciences and Master of Science in Biostatistics degree from the Texas A&M School of Public Health.



Schola Matovu, PhD, RN

+ Assistant Professor

Schola Matovu is a gerontological nurse researcher, educator, and social scientist. She works to advance science and contribute to alleviating global social injustices such as poverty, gender, and health inequalities. Through advocacy, service, and empowerment, Matovu strives to advance the nursing profession and promote the health,

well-being, and quality of life of older adults, particularly those with caregiving responsibilities. Her foundational research explored the experiences and psychosocial well-being of grandparent-caregivers for grandchildren affected by HIV/AIDS in Uganda. Matovu is a co-founder of Nurse-to-Nurse Global Initiative, a nonprofit whose mission is to promote leadership development for nurses.



Rebekah Perkins, PhD, MS, RN

+ Assistant Professor (Clinical)

Rebekah Perkins' clinical practice has focused on cancer, dementia, and transitions of care, while her research examines nurse intuition as part of decision-making during complex care scenarios. Her chief aim is to teach and foster metacognitive reasoning strategies in nursing students to support patient care in a complex and ever-changing

health care system. Perkins is a Jonas Nurse Leader Alumni Scholar and a Noorda-Hartford Alumni Fellow. She has served on several CON academic committees. Perkins is currently active in the CON's Diversity, Equity, Inclusion, and Outreach Committee and serves on the editorial board of the *Journal of Educational Gerontology*.

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Awards



Jenny Alderden, PhD, APRN

- + National Hartford Center of Gerontological Nursing Excellence (NHCGNE)//Distinguished Educator in Gerontological Nursing



Susanna Cohen, DNP, CNM, FAAN

- + American College of Nurse-Midwives (ACNM)//Fellow with the American College of Nurse-Midwives



Jacqueline Eaton, PhD

- + Sigma Phi Omega: The National Academic Honor and Professional Society in Gerontology//2021 International Video Contest Award



Linda Edelman, PhD, RN

- + The Gerontological Society of America (GSA)//Fellow in the Gerontological Society of America



Lee Ellington, PhD

- + The Graduate School at the University of Utah//Distinguished Mentor Award



Jessica Ellis, PhD, CNM

- + Educator Award for Excellence//Educator Award for Excellence
- + Fellow with the American College of Nurse-Midwives//Fellow with the American College of Nurse-Midwives



Valerie Flattes, PhD, APRN, ANP-BC

- + Utah Nurse Practitioners (UNP)//Community Service Award for Excellence
- + The University of Utah Black Cultural Center//Madam C.J. Walker Resource Award



Kimberly Garcia,

DNP, CNM, FACNM, WHNP

- + American College of Nurse-Midwives (ACNM)//Fellow with the American College of Nurse-Midwives



Teresa Garrett, DNP, RN, PHNA-BC

- + American Public Health Association (APHA)//Lillian Wald Service Award



Youjeong Kang, PhD, MPH, CCRN

- + Heart Failure Society of America (HFSA)//Nursing Investigator Award for Research



Julie King, MSN, CNM

- + American College of Nurse-Midwives (ACNM)//Outstanding Preceptor Award



Gwen Latendresse,

PhD, CNM, FACNM, FAAN

- + American Academy of Nursing (AAN)//Fellow in the American Academy of Nursing

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Awards (Continued from page 45)



Michelle Litchman,

PhD, FNP-BC, FAANP, FADCES

- + Association of Diabetes Care & Education Specialists (ADCES)//Fellow of the Association of Diabetes Care & Education Specialists
- + The American Association of Nurse Practitioners (AANP)//AANP Nurse Practitioner State Award for Excellence for Utah



Ana Sanchez-Birkhead,

PhD, APRN, WHNP-BC

- + University Teaching Committee of the University of Utah// Community Engaged Teaching and Scholarship Award



Andrea Wallace, PhD, RN, FAAN

- + University of Utah Academic Affairs// Banner Project Recipient | Presidential Scholar
- + Western Institute of Nursing //Anna M. Shannon Mentorship Award



Barbara Wilson,

PhD, RN, FAAN

- + American Academy of Nursing (AAN)// Fellow in the American Academy of Nursing

Faculty Appointments (Continued from page 43)



Echo L. Warner, PhD, MPH

+ Assistant Professor

Having grown up in rural Utah, Echo Warner is committed to performing research that promotes the health and wellbeing of those in rural and medically underserved communities. For over a decade, she has been immersed in research on adolescent and young adult cancer patient and caregiver experiences. Her current research focus is on

the interpretation and spread of cancer and vaccine misinformation on social media. Warner has received numerous awards and recognitions for her work, and has published 54 first or co-authored publications. She most recently completed postdoctoral training in the University of Arizona Cancer Prevention and Control Health Disparities T32 program.

Faculty Grants

Researcher	Project	Funding Agency	Grant
Nancy Allen, Ana Sanchez-Birkhead	Development of Peer Facilitator Training Modules in Spanish	Association of Diabetes Care & Education Specialists	\$10,000
Susanna Cohen	Project ARIISE	The Josiah Macy Jr. Foundation	\$299,953
Kara Dassel	End-of-Life Care Planning Intervention	Alzheimer's Association	\$149,998
Jacqueline Eaton	Developing and Testing the Enhancing Active Caregiver Training (EnACT) Intervention for Dementia Family Caregivers	National Institute on Aging	\$662,466
Jacqueline Eaton, Katarina Friberg Felsted	Have you heard of HB60? Promoting Life Long Learning for Older Adults through Higher Education	Gerontological Society of America	\$2,500
Lee Ellington	Research Collaborative for Family Caregivers of Older Adults	National Institute on Aging	\$810,000
Deanna Kepka	HPV Vaccination Boot Camp for School Nurses in Utah	Utah Department of Health	\$15,000
Lauri Linder	Enhancement of an mHealth Pain Management Resource for School-Age Children	St. Baldrick's Foundation	\$56,768
Michelle Litchman	Adapting and assessing the feasibility of a diabetes self-management education and support telehealth intervention for rural populations to reduce disparities in diabetes care	National Institute of Nursing Research	\$385,983
	A Pilot Trial of a Financial Toolkit for Emerging Adults with Type 1 Diabetes	Association of Diabetes Care & Education Specialists	\$100,000
Paula Meek	Nurse Faculty Loan Program 2020-2021	Health Resources and Services Administration	\$207,907
Sara Simonsen	The Effect of Mobile Immersive Video and Motivation and Problem Solving on Enrollment in the Diabetes Prevention Program	Centers for Disease Control	\$103,520
Catherine Staes	Death Reporting using a SMART-on-FHIR app -a Cost-benefit and Feasibility Assessment	Utah Department of Health	\$22,000
	Opioid-related interoperability Training and research question	Utah Department of Health	\$42,716
	Data Analytics to Improve End-of-Life Care	Hitachi	\$119,998
Katherine Supiano	Grief from Overdose Death Project-Phase II Evaluation of Clinical Outcomes in a Hybrid Implementation-Effectiveness Model	Utah Department of Human Services/ Substance Abuse and Mental Health Services Administration	\$614,818
Andrea Wallace	Intensifying Community Referrals for Health: The SINCERE Intervention to Address COVID-19 Health Disparities	National Institute of Nursing Research	\$697,753

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Check out our new website!

The College of Nursing launched its updated website earlier this year. The new website is a community hub for all members of the College of Nursing community—alumni, donors, students, faculty & staff, peers, friends—there is a place for everyone. Keep checking back for more great content and additional features.








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