



**Diversity changes us...for the better**

**ALUMNI  
NEWSLETTER  
2014**

*“Enhancing  
diversity  
in nursing is  
a quality  
and safety  
imperative . . .”  
(see page 11)*

Gaurdia E. Banister, RN, PhD (BSN '80)  
2014 UW Distinguished Alumna  
2008 UW FWSON Distinguished Alumna  
Executive Director, Institute for Patient Care at  
Massachusetts General Hospital, Boston, Massachusetts



# LETTER FROM THE DEAN

According to the American Association of Colleges of Nursing (AACN, 2013), individuals from ethnic and racial minority groups account for 37% of the US population, and this percentage is predicted to continue to grow over the next decade. However, nurses from minority backgrounds represent only 19% of the registered nurse workforce. Between 7 and 10% of the RN workforce is male, a significant increase with almost 190,000 male nurses in the US in 2008. However, the lack of diversity in full-time nursing faculty is concerning, with only 12.3% from a minority background and only 5.4% male. Consequently, all national nursing organizations, federal organizations such as the Division of Nursing and other key stakeholders agree that a top priority in nursing must be the recruitment of underrepresented groups into nursing.

How are we doing? At a national level, the AACN reports that the percentage of students with minority backgrounds in baccalaureate (28.3%), master's (29.3%) and research-focused doctoral (27.7%) programs has grown significantly. In addition, the number of male nursing students also is higher with men comprising 10% of students in both baccalaureate and master's programs, and 7.9% of research-focused doctoral programs.

At the Fay W. Whitney School of Nursing, we have renewed our emphasis on diversity in our philosophy ([uwyo.edu/nursing/about-our-school/mission-philosophy.html](http://uwyo.edu/nursing/about-our-school/mission-philosophy.html)). As noted in our values, "We are committed to a diverse learning community that fosters intentional and respectful inclusion of psychological, physical, social, developmental and spiritual dimensions of all." And we've emphasized in our goals for 2015-2020 that we want to "facilitate transformative learning experiences to foster



Mary Burman, Dean

global, dynamic and creative thinkers and innovative problem-solvers."

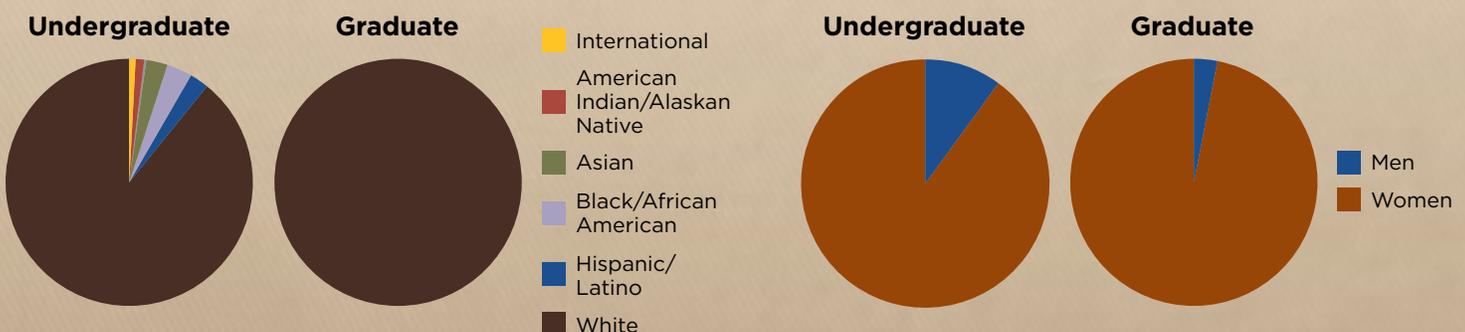
Has this made a difference? In the FWWSON, we also see the percentage of students from underrepresented groups increasing despite that fact that Wyoming's population has always been predominantly white (see graphs below). We see growth in a variety of ethnic and minority groups and men in our undergraduate programs. At the graduate level, the number of men has increased, but we are challenged to recruit students with minority backgrounds.

In this issue of the *Alumni Newsletter*, you will learn about our efforts to diversify our student body, both at the undergraduate and graduate levels. Key are our efforts to diversify those coming into nursing through our recruitment processes, focusing on a variety of underrepresented groups including women of color, men, nontraditional students, isolated rural students and so on. In addition, faculty provide critical content in enhancing our graduates' ability to work with diverse clients, and you'll learn about several courses that highlight this curricular work. Finally, you'll get a glimpse of the impact that our diversity efforts have on the work of our graduates. We received so much wonderful information from alumni that we will feature many of their stories on our webpage, so make a habit of regularly checking our website where our features are refreshed weekly.

Mary E. Burman  
Dean and Professor

P.S. Previous newsletters are available on the school's webpage at [uwyo.edu/nursing/alumni](http://uwyo.edu/nursing/alumni).

## STUDENT DEMOGRAPHICS



# DISTINGUISHED ALUMNI AWARD 2014

Marlene Ethier is the 2014 Distinguished Alumna for the Fay W. Whitney School of Nursing at the University of Wyoming. The school honored Ethier at the school's convocation ceremony in May for her outstanding contributions to the nursing profession through excellence in education and administration. Ethier was also the keynote speaker for the event.

Ethier, a nursing leader in Wyoming for over 25 years, joined the faculty of Western Wyoming Community College (WWCC) as a nursing instructor in 1989 and as the director of the program from 1999-2013. According to one of her nominators, Ethier is "a master of curriculum development, with vision and tenacity to deliver education that follows sound education theory." This nominator noted that Ethier brought a highly successful, innovative and student-centered curriculum to nursing education in 2002.

Ethier's curriculum, centered on problem-based learning, has been used to prepare competent beginning nurses in southwest Wyoming for over a decade—to the satisfaction of the students, who pass their national licensing exam consistently higher than the national average; and to the satisfaction of resulting employers, who hire the new graduates, according to a nominator. The success of her curriculum brought forth invitations to present on problem-based learning at the Nurse Educators of the Rockies International Conference, at the annual Nursing Education Summit and at the Wyoming Nursing Leadership Institute.

During Ethier's tenure as director, the nursing program grew from serving 48 to 80 students in three locations. Under her leadership, WWCC also began a successful distance program utilizing a synchronous web-based platform from which to deliver nursing education to all corners of the service area, opening up nursing education for those who may not otherwise have been able to seek it.

Another nominator notes, "Education beyond mere licensure is a need for us and for our clients. Ethier has worked to address this need in tangible ways through her involvement in the ReNEW efforts in Wyoming [ReNEW: Revolutionizing Nursing Education in Wyoming]. Furthermore, she serves always as a champion of continued education for countless students and practitioners." Ethier is serving on the curriculum committee for ReNEW,



Marlene Ethier (MS, '93) MS, RN, CNE

instrumental in moving a state-wide curriculum forward in Wyoming in order to smooth students' transition to higher education.

Ethier's commitment to nursing education in Wyoming and beyond shows through her service to state and national nursing organizations such as the following: steering committee for ReNEW; chair of Nurse Educators of Wyoming; ambassador to the National League for Nursing; president and treasurer of District #6 Nurses Association; NLNAC program evaluator; and board member for the University of Wyoming School of Nursing Advisory Board, the Wyoming Center for Nursing and Health Care Partnerships Advisory Board and the Wyoming Nurses Association.

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## CALL FOR NOMINATIONS: DISTINGUISHED ALUMNI AWARD 2015

Please consider submitting a nomination for the 2015 Distinguished Alumni Award. Submit online at: [www.uwyo.edu/nursing/alumni](http://www.uwyo.edu/nursing/alumni). Click on Distinguished Alumni Nomination Form. The deadline is February 1, 2015.

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# diversity

## Recruiting pipeline and diversity

### BASIC BSN

A few years ago the Basic BSN program boasted a high content of males; another year an influx of students from Nepal enriched the program with their input and



Nursing student Peter Skorcz and Professor Ann Wislowski greet students and parents in the UW Classroom building, where they speak about nursing at a UW Discovery Days event.

experiences. Last year's graduating class enjoyed five international students from Bolivia to Ethiopia to Nepal; the class also included five males and two older students returning to school for a career change. Every year the class has a different makeup and yields interesting and varied class climates that keep both the students and faculty interested and challenged.

The school utilizes a variety of recruitment forums that attracts an ever-growing diverse population. UW Discovery Days, Health Sciences Showcase Saturdays and scheduled Nursing Visit Days bring high school students and their parents to campus to see for themselves the state-of-the-art facilities and to hear from nursing faculty and students about the career of nursing. For those students who cannot come to campus, the school

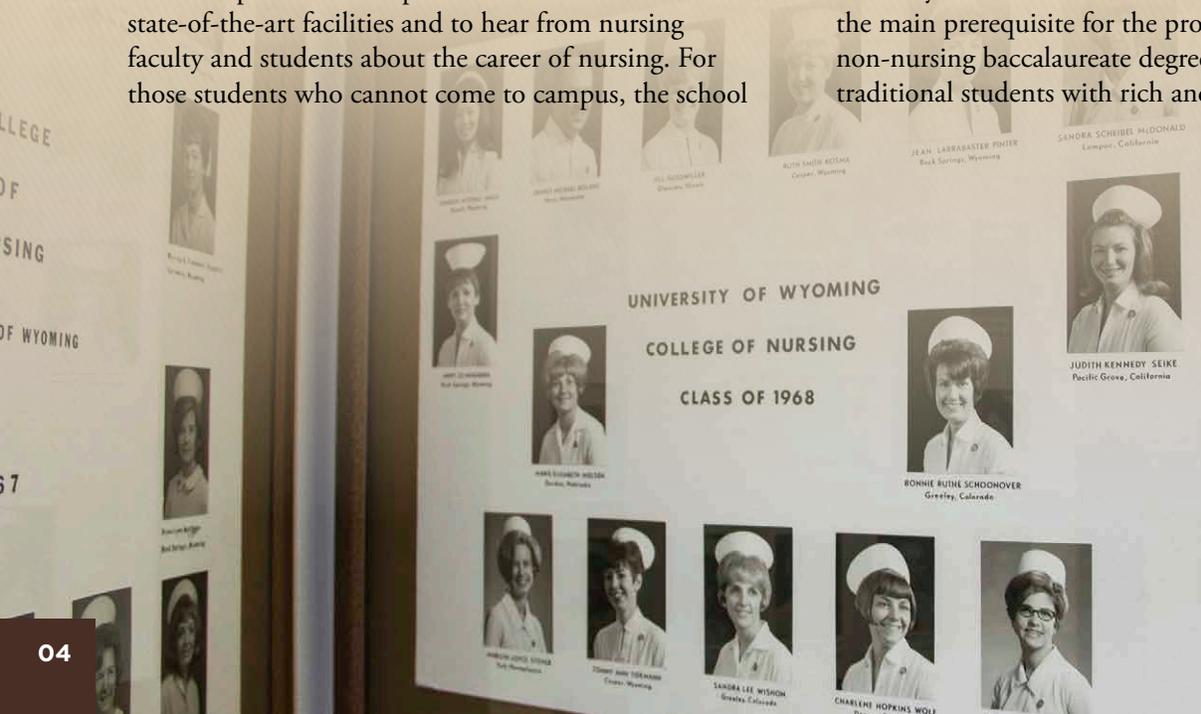
2013 BRAND RWJF Scholars in the Skills Lab.



participates in several Wyoming high school career fairs—both large state fairs such as the AHEC High School Healthcare Career Fair in Casper as well as individual high school fairs statewide. For the UW college population, nursing maintains a presence at the UW Multicultural Fair and at our own UW Nursing and Healthcare Career Fair each fall.

### BRAND

Diversity is built into the BRAND program, since the main prerequisite for the program is a previous non-nursing baccalaureate degree. Therefore non-traditional students with rich and varied backgrounds



Though a presence of males and/or international students can be found on the graduate picture displays as far back as 1956, a close look at the on-campus nursing program we call "Basic BSN" reveals a growing presence of diversity in the student population.

come together each year, forming a unique class of motivated, focused learners.

The recruiting pipeline most dedicated to attracting a diverse student population in BRAND is the Robert Wood Johnson Foundation's (RWJF) initiative, "New Careers in Nursing." Each \$10,000 scholarship that RWJF offers funds a traditionally underrepresented student in this accelerated program. RWJF believes that such students will bring a diverse and valuable perspective to the field to become capable, culturally competent nurses and leaders.

## RN/BSN

Collaboration with our community partners—Wyoming's community colleges and healthcare facilities—helps ensure the student population in the RN/BSN Completion program is a mix of traditional and non-traditional students. Both types of students bring unique perspectives to the online course discussions, enriching the education experience for students and faculty alike.

Wyoming community colleges facilitate recruitment of this diverse population through faculty and admission counselors, who provide information about UW's admission process, requirements and academic coursework necessary for successful online completion of the BSN. Several Wyoming community college nursing faculty teach in the RN/BSN Completion Program, not only bringing their expertise as nursing educators, but also providing insight for the community college nursing students as to how the completion program is attainable for them.

Similarly, nursing administration and educators at Wyoming healthcare facilities partner with UW nursing faculty to encourage nurses who may have graduated from their basic programs as many as thirty years ago that a BSN is realistic and manageable. Nurses are informed that there is no time-limit for receiving credit for acceptable coursework completed in their previous educational endeavors.

## MS NURSE EDUCATOR

With regard to recruiting for diversity, the Master's Nurse Educator program took advantage of a unique opportunity to reach the diverse populations of rural Wyoming through a grant from HRSA (Health Resources and Services Administration), secured by nursing faculty and principal investigator, Pamela Clarke. "The Leadership Education to Advance Practice 'LEAP' Master's grant," says Clarke, "was to target our outreach to increase the diversity of the workforce as a long-term goal. We visited every community college and hospital in the state by car and by air using the UW plane. We focused on the



The above candid shot shows the first class of the new DNP program chatting with Dr. Loretta Ford, co-founder of the national NP movement.

importance of bachelor's education as a stepping stone to the masters, so encouraging nurses to enter the RN/BSN program was part of the process." Clarke also visited high schools on the reservation as well as targeted Hispanic communities, encouraging students into the nursing pipeline.

## DNP

The Doctor of Nursing Practice Program (DNP), still in its infancy with the first class expected to graduate in 2015, already exhibits diversity in its members with the inclusion of male classmates. But in recruiting, the faculty coordinator for the program, Ann Marie Hart, has taken on an unusual focus, and in this case the diverse student she seeks is the **young** student.

Travelling through the state, Hart and fellow faculty member Candace Stidolph meet with high school students to plant the seed early to seek a DNP nursing career. They also meet with students about to graduate from BSN programs, encouraging them to go directly into the DNP program instead of first working "for a couple of years." That "couple of years" typically morphs into several years, and by the time individuals finally go back to school and would finish a DNP program, they have many fewer years to make as great of an impact on the healthcare system as they could with the advanced education of a DNP.

In no way does that mean the program is closed to the non-traditional, experienced student. "The younger students learn so much from the maturity and gleaned wisdom of the more experienced nurses," says Hart. "And the freshness and enthusiasm of the younger students reinvigorates the others. It's a great blend and everyone benefits."

# diversity

Diversity in the undergraduate curriculum

## NURS 3020 CULTURAL DIVERSITY AND FAMILY HEALTHCARE

By Mary Anne Purtzer, PhD, RN

### LEARNING TO PROVIDE HOLISTIC, FAMILY-CENTERED CARE

In our Cultural Diversity and Family Healthcare course, undergraduate nursing students learn to provide holistic, family-centered care that addresses diverse human needs. Students build upon family strengths to help motivate for change and offer hope, and work in partnership with families to develop mutual goals, interventions and outcomes. In this course, learning goes beyond the examination of family belief systems and culturally-specific attributes (Tervalon & Murray-Garcia, 1998). Students learn that culture is ever changing; that culture does not determine behavior, but rather affords families a range of thoughts and possible actions (Hunt, 2001, p. 134). Students also learn that it is not possible for nurses to predict the beliefs and behaviors of individuals based on their race or ethnicity (O'Connor, 1996), but that culture provides the framework from which families understand themselves and their experiences (Hunt, 2001, p. 134).

### LEARNING TO PRACTICE CULTURAL HUMILITY/CRITICAL SELF-REFLECTION

Students enter a personal journey of becoming culturally-competent. Inherent in cultural competence is learning to practice cultural humility (Hunt, 2001). Cultural humility is the lifelong process of critical self-reflection (Tervalon & Murray-Garcia, 1998) that requires embracing the belief that one's own culture is not the only or best culture (Schuessler, Wilder, & Byrd, 2012, p. 96). Cultural humility addresses power imbalances in the family-nurse relationship, facilitates advocacy and partnerships with families, and requires a humble attitude to assess anew the cultural aspects of family experiences (Tervalon & Murray-Garcia, 1998). Cultural humility requires the development of critical self-reflective skills, i.e. looking inward and questioning one's personal assumptions about thoughts, emotions and behaviors (Cranton, 2006) that are embedded in one's understandings of the family encounter (Tervalon & Murray-Garcia, 1998). Critical reflection and dialogue are essential components

of transformational learning and are woven throughout course teaching strategies and assignments.

### AN INTERPROFESSIONAL EDUCATION LEARNING OPPORTUNITY

A unique opportunity offered in this course is interprofessional education (IPE). Evidence indicates that working collaboratively in interprofessional healthcare teams is an important strategy for improving patient health outcomes (Greiner & Knebel, 2003). Each student is assigned to a small team that consists of students from four disciplines within the College of Health Sciences (CHS), i.e. communication disorders, nursing, pharmacy and social work. The purpose of the assignment is to integrate roles and responsibilities of each discipline into an interdisciplinary and culturally-sensitive plan of care (based on a case study) while addressing critical reflective questions that facilitate learning. An evaluation of student learning demonstrated increased student



Faculty from four disciplines with the College of Health Sciences designed, implemented and evaluated an embedded interprofessional education unit. (l-r): representing Social Work—Lindsey Overstreet; Pharmacy—Carol Hermansen-Kobulnicky and Reshmi Singh; Communication Disorders—Catherine Ross; Nursing—Mary Anne Purtzer.

confidence in (a) explaining the roles and responsibilities of other professionals and how the healthcare team works to provide care, (b) engaging diverse professionals who complement their own expertise to meet family-care needs and (c) using the complementary abilities of other members of the team to optimize patient care. One student reported the following:

This IPE assignment helped to eliminate some of my own biases and misunderstandings about the other three professions. It made me more confident in my nursing knowledge and scope of practice. Understanding my own and other professional roles helps you figure out how to completely and safely provide care.

## LEARNING TO QUESTION PERSONAL ASSUMPTIONS

Guest speakers also contributed to changed student perceptions as they shared their personal life experiences within the context of the healthcare system and family. One student illustrated how her assumptions were challenged with guest speaker, Professor Todd Corbett.

I learned one remarkable fact that changed my perspective on everything. Professor Corbett has been deaf since he was born. He said that since he has always been this way that he feels that his deafness is a part of his culture. The remarkable fact he shared was that he WANTED to be deaf. Doctors have mentioned the newest medical technology to him, but he declined these offers.

Students also viewed the *Diversity and Health Video and Discussion Series* developed by Kaiser Permanente with discussion facilitated by Lisa Shipley, Manager of CHS Student Advising. These sessions offered opportunities to critically reflect on personal assumptions regarding various cultural groups. Regarding the video/discussion of African Americans, one student stated:

“I was shocked to learn that there is still so much discrimination between blacks and whites especially in the healthcare system. I thought that our society had moved past that.”

## INTEGRATING CLINICAL EXPERIENCES WITH DIDACTIC LEARNING

Lastly, critical reflection essays offer a means to integrate clinical experiences (in a concurrent clinical course) with the didactic learning of this course. The learning objective for the Critical Reflection Essays is to critically examine one's personal assumptions that are inherent in personal

understandings and goals of a client encounter (a first step in developing cultural humility). One student stated:

My assumptions prior to my time spent in the operating room were based off of biases I had unconsciously gained through seasons of phony TV shows and gossip of distraught nurses. I am now working towards not only modifying, but also eliminating these assumptions. I believe assumptions based off of unreliable sources may lead to bad outcomes. I will try to be more open-minded and less biased towards any unfamiliar circumstances.

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Todd Corbett, American Sign Language and Deaf Studies faculty from Communication Disorders, challenges students' assumptions about deaf patients.

# diversity

Diversity in the graduate curriculum

## NURS 5010 RURAL HEALTH AND HEALTHCARE

By Mary Anne Purtzer, PhD, RN

NURS 5010 Rural Health and Healthcare is an online course for graduate Nurse Educator program students. This course offers the opportunity to gain an understanding of rural residents' vulnerabilities, health beliefs and practices, and patterns of seeking healthcare. Rural residents are studied within the context of ethics, health policy, rural nursing theory and the rural health-care system. Students are challenged to broaden their perspectives regarding rurality and enhance their ability to impact rural health disparities through their nursing roles of teacher, clinician and leader. Course assignments include readings, discussions and projects that expose students to qualitative inquiry, i.e. a face-to-face interview of a vulnerable rural resident and photo-interviewing. This article offers a glimpse into the photo-interviewing assignment.

### PHOTO-INTERVIEWING: TELLING YOUR RURALITY STORY

Photo-interviewing is a strategy that facilitates critical self-reflection and offers a means to challenge student perspectives (Taylor, 2002). A photo-interviewing project designed for this course, Telling Your Rurality Story, entails the expression and questioning of students' personal perspectives regarding values, skills, knowledge, assumptions and emotions as related to rural residents, rural health and healthcare, and nursing. Students develop their personal rurality story through a process that includes (a) critical self-reflection, (b) photography that metaphorically represents these reflections and (c) dialogue with fellow classmates that contributes toward new insights and changed perspectives.

**CRITICAL SELF-REFLECTION.** Critical self-reflection is a high-level reflective practice that entails self-examination of internalized assumptions (Cranton, 2006, p. 95). It is a skill that contributes to the development of cultural humility and the provision of culturally-competent care (Tervalon & Murray-Garcia, 1998). To this end, the photo-interviewing assignment contains questions that facilitate critical self-reflection regarding personal assumptions of rural residents, rural health and healthcare, and nursing.

**PHOTOGRAPHY.** Students learn photography basics, including the use of colors, textures and shapes that can be used metaphorically to represent personal reflections. Students take photographs that capture their reflections and select the most representative photos to share with fellow classmates. Examples are offered that were taken at the beginning of the course. Note that students focused on their perception of rural resident values.



Left:  
"Hard work"  
(brown color and  
rugged texture)



Right:  
"Honesty and  
truthfulness"  
(white clouds)



"Health and heartiness" (brown and green colors)

**DIALOGUE, NEW INSIGHTS AND CHANGED PERSPECTIVES.** Students discuss their reflections represented in the photos, as well as any new perspectives or insights gained through their discussions and readings. This is done at the beginning and the conclusion of the course. By course completion, students not only change their perceptions of rurality, but think in more depth about health issues experienced by rural residents. Several new insights are offered:



Top: Sense of community—“Churches and schools are often gathering places and centers of community in rural areas. Before this course I viewed rurality in terms of isolation rather than aspects of community.”

Second from top: Rural resident value—“A garden is [symbolic of] rural dwellers’ value of independence and self-reliance” [which impacts how they view their health and healthcare needs].

Second from bottom: Access to healthcare—“Limited hours at the only doctor’s office in a rural community: not only are rural dwellers less likely to seek care for ailments they don’t deem severe enough to limit work, they are further limited due to decreased access to care.”

Bottom: Vast spaces—“There are challenges in transportation and separation from opportunities. I realized that for some, open spaces might seem empty and lonesome.”



**Changed perspectives-Consolidated critical self-reflections.** “At the onset of the course, my vision of rural was narrow. I had formed my views about rural residents around what I perceived was lacking, e.g. education, self-discipline and good life-style habits. I knew that healthcare deficits included limited care and facilities, [and now know that it also includes] challenges faced by hospitals and clinics especially in terms of recruiting and retaining nurses. I now see that rural dwellers are diverse and [have strengths], e.g. a sense of belonging and community, the ability to rely on neighbors and lay people to provide certain aspects of care, and the ability to prioritize health needs.”

“I expected rural residents to hold the same values as myself. I discovered that my expectations and lack of humility was unprofessional and prevented me from not only developing relationships with rural residents, but from appreciating their individuality. [I have learned that] I can improve myself when it comes to professionalism, honesty and compassion. I am encouraged by the displays of compassion I see every day in a rural community. This course has challenged what we think we know about nursing and how we are to behave as nurses.”



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# diversity

Diversity as alumni

## ASHLEY LAIR BASIC BSN CLASS OF 2010

Ashley Lair not only went to Honduras with the nursing brigade during her schooling, but after graduation she volunteered with Shoulder to Shoulder and worked in Honduras. She recently applied for her New Zealand nursing license, awaiting new adventures as she seeks to immerse herself in yet another culture.



“Seeing the things that patients experienced in Honduras, the pain and discomfort that people would endure without really complaining was eye-opening, and at times I still struggle with working in the US where we are able to do so much for our patients, some of which can seem excessive at times. Just two very different worlds.”

## DOUNIA MOUHOUCHE 2013 BRAND GRADUATE

Dounia Mouhouche tells her patients at Casper’s Wyoming Medical Center to call her “D” since wants to be accessible to them. She speaks to them in simple words, partially on purpose. But Mouhouche admits, “The hardest part of coming to America is the language. People underestimate my knowledge because of the language barrier.” But those “people” do not include her patients, with whom she has no trouble communicating, because the simple words she speaks are what the patients need to hear in the midst of scary health ordeals.



“D” came to the United States from Algeria where she was a physician. “Physicians in Algeria are much like the ‘hospitalist’ of America,” says Mouhouche. “The Algerian physicians do the assessments and follow the patients closely, whereas the nurses have a degraded role of a technician, allowed only to give injections or start IVs.”

Mouhouche followed her husband to Colorado and enjoyed being a stay-at-home mom with their young son. But the call back into a medical career was strong. “I like fixing people,” says ‘D.’ Relating most to the nurse role in America, doing assessments and maintaining close patient care, she entered the BRAND program with a RWJ grant for her diversity (see pgs. 4–5). “I love the University of Wyoming. The admissions process is so manageable for international students at UW. Every time I called, there was a person on the end of the line who took the time to carefully answer all of my questions. There is no school like UW!”

## HOLLY FRIESEN 2009 MS FNP GRADUATE

When Holly Friesen graduated from the UW FNP program, she traveled to the Ukraine and remains there today, living in Odessa.



“There are so many advantages and blessings we enjoy and take for granted as citizens of the United States. It gives me joy to work in countries that do not have these same advantages and access to healthcare. Providing even small things can make such a huge impact on their lives.”

## ED HENRY MS FNP CLASS OF 2002 AND BASIC BSN CLASS OF 1995

My experience in the past four years, working with the Department of Veterans Affairs, has allowed me to experience a wide spectrum of diversity. First, I see

diversity in the veterans I take care of daily, from the WWII veteran involved in nine Pacific invasions to the 20-year-old returning from the middle east, to the Vietnam and Korean War veterans, to those who have served and never saw combat.

Secondly, I see diversity in the types of medical and mental issues seen within the VA, from females and males who have experienced sexual trauma to the vet who suffers from PTSD; from the aging vet with multiple comorbidities to the young soldier in perfect health. I might see in one day a 20-year-old returning Afghan vet; a 60-year-old with diabetes, hypertension, congestive heart failure, neuropathy and liver failure; and an 80-year-old who is dying from chronic renal failure and CHF. Not unlike the civilian population—but perhaps more profound—there is a great deal of substance abuse, as veterans try any way possible to deal with mental and physical injuries suffered.

Thirdly, I see diversity in what I am asked to do for these patients, from supplying prosthetic devices to arranging specially care in cardiology or gastroenterology; to supplying or arranging urgent orthopedic care for a vet involved in a 4-wheeler accident over the weekend and who waited until Monday morning to be seen.



Ed Henry

Fourthly, I see diversity in how health care is delivered, from providing tele-health care to vets at remote sites, to doing the same for our vets receiving specialty care such as mental health services, tele-dermatology and tele-orthopedics at our Afton Clinic, to seeing patients in the traditional face-to-face manner.

Finally, and what I see is most important, is the diversity in how I must adapt to each individual's particular circumstance. If I have learned anything in my experience with the VA, it is that every one of our veterans has sacrificed in some way to help provide the freedoms we enjoy in this country. I must be diverse in how I individually treat these veterans, helping to optimize their physical and mental health.

### GAURDIA BANISTER BSN CLASS OF 1980

Gaurdia Banister (on the cover of this magazine) has been the Executive Director, Institute for Patient Care, at Massachusetts General Hospital in Boston for several years. Her focus has been advancing an agenda to increase

the diversity of the nursing workforce in order to reduce health disparities. Says Banister, “Enhancing diversity in nursing is a quality and safety imperative for patients and families receiving care. Practicing with diverse nursing colleagues offers

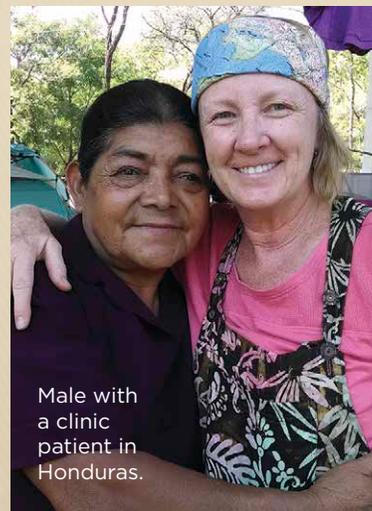
differing viewpoints and ideas that lead to better problem-solving and decision-making. In addition, with the growing diversity of our patient population, having nurses who reflect the population that is being served reduces barriers, thwarts stereotypes, enhances communication and improves patient outcomes.”



Gaurdia Banister

### MARCIA MALE MS NURSE EDUCATOR CLASS OF 2014

My first journey out of the US was to Nepal where I stayed for three months—an immersion that changed my life. I did an observation of lowland vs highland diseases in the pediatric population. The most recent journey was as a nursing faculty to Honduras with the university's healthcare



Male with a clinic patient in Honduras.

brigade. US students struggle with the purpose and outcome of our presence; it's the beginning of the global health journey. I truly believe that caring support through consistent presence in a community is the greatest benefit. My goal now is to work side by side with nurses, nurse educators and nursing students from other countries with the intent to support a high level of nursing knowledge skills and attitudes globally, to meet the patient needs of the region.

What I enjoyed most about experience abroad: No one complained. It was quite remarkable. In an appropriate setting people would discuss problems, but as a culture, acceptance and tolerance are heightened by a choice to live a happy life regardless of the situation. It was deafening when I returned to the US... [where there is such] discontent with daily life.

# SCHOOL UPDATE

## NEW FACULTY

**Rebecca Carron, PhD, RN, NP-C/Assistant professor:** Carron will be teaching Evidence-Based Practice for the undergraduate students and Foundations of Integrative Advanced Practice Nursing in the DNP program. Carron comes from Laramie and enters academia following a career as an FNP in the field of dermatology. Her research focuses on spirituality and coping with chronic disease.



**Sarah Anne Kooienga, PhD, FNP, ARNP/Assistant professor:** Kooienga comes from Washington State University Vancouver and will be core DNP faculty, teaching in the DNP program-FNP option. An FNP for 25 years, she provided life span primary care to a linguistically and culturally diverse group of patients. She spent time as visiting faculty in New Zealand and is interested in the international development of the primary care NP role. She deals with Electronic Medical Records, so will assist in incorporating new software with EMR into the curriculum.



## NEW STAFF

**Kayla Mary Boshell, BS/Office associate for the BRAND and RN/BSN Completion programs:** Boshell stepped into her new position as staff support for these two outreach programs, experienced in the UW system through work at the Registrar's Office. She moved to Laramie last July from southern Utah to support her husband in his law degree studies.



**Joanne Prael/Assistant coordinator, Clinical Simulation Center:** Prael, from Laramie, was employed with UW from 1989-2006 at Campus Express ID, Chemistry, Chemical and Petroleum Engineering, and Center for Advising and Career Services offices. She served on active duty tour from 2006-2013 with the Wyoming Active Guard Reserve as a Flight Operations Specialist.



## 2014 FACULTY, STAFF, AND STUDENT AWARDS

### FACULTY AND STAFF AWARDS

**Cheri Bellamy:** College of Health Sciences (CHS) Outstanding Teaching in Geriatrics Award

**Erin Dobyns:** UWYO Staff Incentive Award

**Shelly Fischer:** Humenick Research Grant Award

**Ann Marie Hart:** Humenick Research Grant Award  
Communication of Wisdom (COW) Award CHS  
Interprofessional/Interdisciplinary Award

**Debbie Shoefelt:** CHS Outstanding Staff Award

**Susan Steiner:** CHS Outstanding Teacher of the Year

**Linda Williams:** CHS Innovation in Teaching Award

### STUDENT CONVOCATION AWARDS

On May 9, 2014, 226 graduates were honored: 43 Basic BSN, 26 BRAND, 147 RN/BSN Completion, and 10 MS Nurse Educators. Awards were presented at the ceremony as follows.

### BASIC BSN AND BRAND STUDENT AWARDS

**Ian Adams:** Gertrude Gould Memorial Award, *excellence in public health nursing practice*

**Liberty Barker and Lindsey McGee:** Dorothy Tupper Memorial Award, *caring, compassion and interpersonal communications*

**Margot Bonifas and Beverly Menghetti:** Amelia Leino Memorial Award, *outstanding in family nursing*

**Rachel Dowd:** Beverly McDermott Award, *leadership and public activism*

**John Fitch:** Passion for Nursing Award, *devotion, allegiance and commitment to profession of nursing*

**Samantha Gimelli:** SoN Spirit Award, *exceptional spirit and enthusiasm*

**Hilary McCart:** Rudolph "Rudy" and Louise Anselmi and Jeri Kirk Family Trust Nursing Scholarship, *leadership and responsibility*

**Alison Zapp:** Lina Kennedy White Memorial Award, *interest in and aptitude for geriatric nursing*

### RN/BSN STUDENT AWARDS

**Heike Adams:** Professional Nurse Award, *practice, community service and professional service*

**Michaela Walker:** Making a Difference in WY's Health Award, *WY RN/BSN Completion student with demonstrated commitment to continued education and excellence in nursing practice.*

### MS STUDENT AWARDS

**Nancy Granum:** Courage to Teach Award, *personification of a critically reflective attitude about learning and teaching*

**Marcia Male:** Carol Macnee Scholarship Award, *demonstrated excellence in scholarship*

# PUBS, GRANTS, PRESENTATIONS

## ACTIVE GRANTS

**Boyle, D.** (PI), **Burman, M.** (Co-I), Gajewski, B. (Co-PI) (2013-14) Estimating quality disparities between rural and urban hospitals using a composite indicator of falls and pressure ulcers. Parent grant: Wyoming IDEa Network of Biomedical Research Excellence, NIH, NCRR, NIGMS, \$40,000.

**Burman, M.** (PD) (2013-2015) Revolutionizing Nursing Education in Wyoming (ReNEW). Project funded by Robert Wood Johnson Foundation "State Implementation Grant" program, \$150,000.

**Burman, M.** (PD) (2013-2015) Wyoming Center for Nursing and Health Care Partnerships. Project funded by the Wyoming Workforce Development Council and the Department of Workforce Services, \$26,000.

**Burman, M.** (PD) (2011-2014) Nursing Education and Leadership in Wyoming (NEWL). Project funded by the Robert Wood Johnson Foundation "Partners Investing in Nursing's Future" (PIN) program through the Wyoming Community Foundation, \$450,000.

**Clarke, P. N.** (PI) (2010-2014) LEAP from RN to MS: Preparing Nurse Educators. Funded by Health Resources Administration (HRSA), \$1,108,708.

**Hart, A.M.** (PI) (2012-14) Advanced Education Nurse Traineeship. Funded by Health Resource Services Administration (HRSA), \$330,000.

**Thomas, J.** (2014) The creation of tailored health communication for type 2 diabetes risk reduction. CHS Seed Grant, College of Health Sciences, University of Wyoming, \$6,180.

**Tull, C.** (PI) (2013-2014) New Careers in Nursing Scholarships grant. Round six. Funded by Robert Wood Johnson Foundation, \$50,000.

## RECENT PUBLICATIONS 2014

**Boyle, D.**, Cramer, E., Potter, C., **Gatua, M.**, & Stobinski, J. (in press) The relationship between direct care RN specialty certification and patient outcomes in surgical units. *AORN Journal*.

Garrard, L., **Boyle, D.**, Simon, M., Dunton, N., & Gajewski, B. (in press). Reliability and validity of the NDNQI<sup>®</sup> injury falls measure. *Western Journal of Nursing Research*.

Rashid, M., **Boyle, D.**, & Crosser, M. (2014). Developing nurse and physician questionnaires to assess primary work areas in intensive care units. *Critical Care Nursing Quarterly*, 37, 317-335.

Choi, J., & **Boyle, D.** (2014) Differences in nursing practice environment among US acute care unit types: A descriptive study. *International Journal of Nursing Studies*. [Epub ahead of print]

Park, S., **Boyle, D.** Bergquist-Beringer, S., Staggs, V., & Dunton, N. (2014). Concurrent and lagged effects of registered nurse turnover and staffing on unit-acquired pressure ulcers. *Health Services Research*. [Epub ahead of print]

Jiang, Y., **Boyle, D.**, Bott, M., Wick, J., Yu, Q., Gajewski, B. (2014) Expediting clinical and translational research via Bayesian

instrument development. *Applied Psychological Measurement*. 38, 296-310.

Choi, J., **Boyle, D.**, & Dunton, N. (2014) A standardized measure: NDNQI nursing care hours indicator. *Western Journal of Nursing Research*, 36, 105-116.

Diaz Swearingen, C., **Clarke, P.**, & **Gatua, M.** (in press). Are we there yet? An assessment of cultural competencies in rural nursing education. *Nursing Perspective Journal*.

**Hart, A.** (in press) Evidence-based recommendations for the diagnosis and management of Acute Bronchitis in Adults. *The Nurse Practitioner*.

**Purtzer, M.**, & Overstreet, L. (2014) Transformative learning theory: Facilitating mammography screening in rural women. *Oncology Nursing Forum*, 41(2), 176-184.

Hermansen-Kobulnicky, C., & **Purtzer, M.** (in press) "Cancer patient tracking and journaling: What contribution can it make to quality of care?" *Clinical Journal of Oncology Nursing*.

**Thomas, J.**, & Borrayo, E. (in press). The impact of perceived stress and psychosocial factors on missed class and work among college students. *Journal of College Counseling*.

**Thomas, J.**, & Borrayo, E. (in press). The role of psychosocial factors in illness behavior among women. *Women & Health*.

**Thomas, J.**, **Hart, A.**, & **Burman, M.** (2014) Improving health promotion and disease prevention in NP-delivered primary care. *Journal for Nurse Practitioners*, 10(4), 221-228.

**Thomas, J.**, & Moring, J. (in press). Development and validation of the revised generalized health-related self-concept inventory. *The American Journal of Health Behavior*.

**Wislowski, A.** (in press). Nurses gone wild: The role of nurses in wilderness medicine. *Journal of Emergency Nursing*.

## RECENT PUBLICATIONS 2013

Choi, J., & **Boyle, D.** (2013) RN workgroup job satisfaction and patient falls in acute care hospital units. *Journal of Nursing Administration*, 43, 586-591.

**Burman, M.**, **Robinson, B.**, & **Hart, A.** (2013) Linking evidence-based nursing practice and patient-centered care through patient preferences. *Nursing Administration Quarterly*, 37(3), 231-241.

**Clarke, P.** & Hassmiller, S. (2013) Nursing Leadership: Inter-professional education and practice. *Nursing Science Quarterly*, 26(4), 333-336.

**Hart, A.** (2013) Evidence-based recommendations for the diagnosis and management of Gastroesophageal Reflux Disease (GERD). *The Nurse Practitioner*, 38(8), 26-34.

**Hart, A.**, Morgan, K., & Casper, G. (2013) Rural parent behaviors and expectations when caring for children with acute respiratory infections (ARIs). *Journal of the American Academy of Nurse Practitioners*. 25(8), 431-439.

Hermansen-Kobulnicky, C., & **Purtzer, M.** (2013) "How I kept track of it of course was my business": Cancer patient self-monitoring as self-stylized work. *Palliative and Supportive Care*. doi: 10.1017/S1478951513000308

# COMMUNITY PARTNER OF THE YEAR



Premier Bone & Joint-Laramie

## BASIC BSN: PREMIER BONE & JOINT CENTER, LARAMIE

The Basic BSN Program at the FWWSO honors the Premier Bone & Joint Center (PBJC)-Laramie with the 2014 Community Partner Award. For many years, the UW Basic BSN Program has partnered with PBJC to educate future nurses. “PBJC’s commitment to the education of students seems to grow continually,” says Holly Miller, faculty coordinator of the Basic BSN program. “For instance, the PBJC staff recently developed a special orientation program for students in order to better prepare them for experiences at PBJC.” The students’ perspective is consistently positive about PBJC. UW nursing faculty members also praise this clinical agency for the staff’s enthusiasm, organization and commitment to excellence. PBJC nurses who oversee students in clinical (called *preceptors*) believe the students need to have the *entire picture* of the surgical experience. They therefore work tirelessly to provide such for students, including rotations in the preoperative area, the operating room and the post-anesthesia care unit. Students are challenged to use their knowledge and skills in this supportive environment.

## BRAND: CAMPBELL COUNTY MEMORIAL HOSPITAL, GILLETTE

“The working relationship between Gillette’s Campbell County Memorial Hospital (CCMH) and BRAND is a model of cooperation and leadership,” says Candace Tull, BRAND coordinator. “This relationship benefits the profession of nursing, provides excellence in patient care and a legacy for many students to come. We

are proud to announce CCMH as BRAND’s 2014 Community Partner.”

CCMH is an integral partner in the implementation of the BRAND program. Students are welcomed in fall, spring and summer semesters to fulfill various clinical requirements. CCMH hosts students in every aspect of patient care, providing clinical experiences from newborn to end of life care and everything in between. Consequently, student evaluations of CCMH are consistently positive. To cap it off, many BRAND students enjoy employment there following graduation.

Key to the CCMH/UW partnership is the management CCMH Director Veronica Taylor and Director of Nursing Sue Howard provide. “They are quick to facilitate students’ experiences as well as clinical faculty placements,” says Tull, “and are consistently available to problem-solve challenges. They welcome as many students as they can—with enthusiasm.”



Above: Campbell County Memorial Hospital, Gillette

Left: Tony Getz, RN, BSN, graduated from BRAND in 2012 and now works at Campbell County Memorial.

# COMMUNITY PARTNER OF THE YEAR



Above: The H.E. Stuckenhoff Department of Nursing at Casper College is the RN/BSN Completion Program's Community Partner for 2014.

Right: Heather Huber, Casper College nursing program director



## RN/BSN: CASPER COLLEGE

FWWSON takes pride in presenting the 2014 RN/BSN Community Partner Award to Casper College (CC). "Casper College nursing directors and faculty are constant advocates for UW BSN education," says Susie Hager, who works closely with Casper College as the UW RN/BSN Completion Program liaison. "They are truly community partners with FWWSON, promoting our efforts to provide accessible BSN education to Wyoming nurses."

How did this partnership emerge? In the 1990s, Hager began teaching for FWWSON. She represented UW's RN/BSN program from a Casper office, and also represented BSN educational opportunities to both RNs and associate degree nursing (ADN) students.

With encouragement from CC nursing program director Jolene Knaus, Hager began informal chats with students. Graduating to a more structured recruitment role when invited to participate in "Advising Day" each semester, she began attending faculty meetings to explain BSN education and spoke with ADN students in their final semester.

Hager continues these practices, giving credit to Knaus and CC faculty for their advocacy and support of advancing students' educational opportunities. Knaus' successors, Kelly Politte and current ADN program director Heather Huber, maintain the open-door policy, encouraging meaningful collaboration between nursing programs.

## DNP: PLATTE RIVER FAMILY PRACTICE, LLC IN CASPER

The Doctor of Nursing Practice (DNP) program presents the 2014 Community Partner Award to Platte River Family Practice (PRFP), LLC, a nurse-owned and -managed clinic in Casper since 2009. PRFP provides outstanding patient-centered primary care to Casper-area residents and provides individualized precepting experiences to family nurse practitioner (FNP) students.

The FNPs at PRFP, including Gruwell, Velvet Hiser, Dorothy Mosher and Chelsea Mower, routinely serve as preceptors. They develop individualized learning plans based upon each student's experience, strengths, weaknesses and goals. In addition to receiving individually tailored experiences, students also benefit by witnessing a nurse-managed organization and an electronic, patient-friendly health records system.

"Comprised of an extraordinary staff," says DNP student Temberly Long, "PRFP provides incomparable care to residents of rural Wyoming, caring for a wide variety of patients and disease processes. The combination of exceptional patient care, community involvement and student support makes PRFP deserving of this 2014 Community Partner Award."

Platte River Family Practice owners, Amy Gruwell (l) and Paula Coates (center), receive the DNP award from UW DNP program clinical coordinator Candace Stidolph. Gruwell and Coates were also named "Women in Business Champion of the Year 2012" by Wyoming District Office of the U.S. Small Business Administration.



# ADVANCED PRACTICE NURSING AWARD

**JULIE HUMMER-BELLMYER, MSN,  
FNP-BC, BSN, CNOR, RNFA**

Julie Hummer-Bellmyer has been a nurse for almost 30 years. She earned her BSN from the University of Northern Colorado in 1985 and her Master of Science with a Family Nurse Practitioner (FNP) concentration from Clarkson College in Omaha, Nebraska, in 2001.

As an FNP, Hummer-Bellmyer has worked in family practice, orthopedic and surgical settings in Colorado and Wyoming. She has been employed at the Cheyenne Veteran's Association Medical Center (VAMC) since 2007, where she now works with the surgical service line in both the operating room and orthopedic clinic.

In 2012, a year before the UW DNP program began, Hummer-Bellmyer contacted faculty, volunteering to teach orthopedic skills to students—an unusual offering from a non-UW graduate and busy professional. So for the past two years, she and her FNP colleague at the Cheyenne VAMC, Denise Kurtis, have delivered a hands-on orthopedic workshop during first-year students' intensive week of advanced health assessment. Hummer-Bellmyer and Kurtis spend significant time preparing for and conducting the workshop in an organized, informative manner conducive to encouraging questions from students. In addition, Hummer-Bellmyer enjoys precepting DNP students, welcoming them to come learn with her at the VAMC.



Julie Hummer-Bellmyer receives award from DNP Program Director Ann Marie Hart at the school's annual Willow Ceremony.

## LIST OF DONORS TO SCHOOL (JUNE 2013-MAY 2014)

The following donors together contributed \$164,000 in gifts to the school. Thank you!

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Todd Koren and Molly Herman  
Joyce and Charles Lyford  
Donna Marburger  
Barry and Phyllis Safeer

# Thank you!

# 2014-2015 SCHOLARSHIP AWARDS

The school gave \$224,100 in scholarships and \$100,000 in BRAND state-funded loan repayment funds for the 2014-2015 year—a GREAT thank you to our generous donors for continuing their support of nursing education through scholarships.

## Bonnie M. and George E. Nugent Nursing Scholarship

Sarah Scott

## BRAND Loan

Ashley Eppler, Catherine Hobza, Nicole Strom, Faith Troegle

## BRAND Scholarship

Julie Ferwerda

## Carolyn Bennett Miknis '59 Nursing Scholarship

Megan Cummings

## Charles and Ruth Rile Scholarship (CHS)

Cornelia Rounds

## DNP Innovative Practice Scholarship

Lisa Aldrich, Chelsea Carter, Kurtis Crawford, Sheriedan Grannan, Laci Little, Temberly Long, Ann Marie Mann, Shandra Shepard, Shawn Snyder, Dyan Thompson, Joslyn Thompson, Kristen Trefren

## Dorothy Tupper Nursing Scholarship

Kellsey Hansen, Elliot Hunt

## Frances E. Gasdek-Eaglehouse and Barry D. Gasdek Scholarship

Sarah Boyer

## Frank R. and Dorothy M. Gruden Scholarship in Nursing

*For Sophomores:* Elliot Hunt

*For Juniors:* Kali Howe

*For Seniors:* Sausha Hernandez

## Gordon S. and Charlott Myers (CHS) Scholarship

Haley Gross

## Jana Leigh Pruitt Memorial Scholarship

Tessa Gareis

## John and Lois Malmquist Nursing Scholarship

Rebekah Davis, Katie Selby

## John V. Leino Memorial Nursing Scholarship

Rachel Eberstein

## Jonas Nurse Leaders Scholarship

Marcella Wildeman

## Larsen Family Scholarship

Elizabeth Kinney, Brooke Weiss

## Mable C. Sargent Scholarship

Krysta Kaumo, Kelsey Kazmar, Gretta MacDonald, Margaret McDonnell, Katie Mullen, Amber Wright

## Marcia L. and William G. Dale Nursing Scholarship

Brianna McMullen, Jennifer Quintana, Elinore Simpson

## McMurry (Susan McMurry Strategic Partnership in Nursing in Wyoming)

Brianna Burget, Samuel Cann, Rori Carubie, Lisa Cutrell, Maria DeHerrera, Taylor DePue, Samantha Fare, Karen Howard, Cassandra LaPointe, Iryna Meisenburg, Rebeca Mickelson, RobbaLee Oleson, Deseriee Padilla, Rebecca Quillen, Sarah Siems, Ashliegh Swanson, Jessica Valdez

## Mildred Agnes Kimball and Adele Colling Memorial Scholarship

Nikki Packer

## Nursing Alumni Scholarship

Arika Oberholtzer

## Paul Stock Scholarship (CHS)

Ashley Nemerofsky

## Pearl Crossley O'Kieffe Memorial Scholarship

Dawn Chalmers

## Robert Wood Johnson Foundation (RWJF) New Careers in Nursing Scholarship

Christopher Busch, Joseph DeLuca,

Nathan Hammerstrom, Jesse Moore, Kevin Plowman

## Rudolph "Rudy" and Louise Anselmi and Jeri Kirk Family Trust Scholarship

Rochelle Kaylor

## Transition Practicum Scholarship-Nursing

Carmen Champlin, Bethany Coon, Rachel Dowd, Terra Harvey, Kylie Hughes, Kelly Leach, Catherine Omondi, Ankita Pokharel, Katherine Stone, Archana Thapa

## Wenger Nursing Scholarship

Heather Beaman, Kaylee Findley, Sonja Harrower, David Ilnitskiy, Carmen McDermott, Amy Michael, Ellen Stowe, Kjersti Varhus, Macey Walker

## Wiest Nursing Scholarship

Rachel O'Connor, Whitney Petersen, Nora Sponaugle, Delaney Tanner, Kali Howe, Tessa Gareis, Rachel Eberstein

# SCHOLARSHIP SPOTLIGHT

“The Robert Wood Johnson New Careers in Nursing (RWJ-NCIN) Grants have allowed us to provide scholarships targeted to underrepresented students in nursing, says BRAND program coordinator Candace Tull, “allowing students who otherwise might not be able to attend this accelerated second degree program. Due to these grants we have increased the diversity of our student cohorts significantly.”

Four of this year’s graduating BRAND class carried the RWJ-NCIN \$10,000 scholarship funding throughout their program of study, and each have special reasons for appreciating the financial support.

John Fitch from Cheyenne says that attending nursing school meant that his family would become a one-income family of four. “Without the RWJ help, it would not have been possible to attend due to the cost of travel

and tuition,” Fitch says. Jonathan Banet from Littleton, Colorado, notes that the BRAND clinical rotations take students all over the state of Wyoming. “A wonderful experience,” says Banet, “but also very expensive. I did not know people in Wheatland, Gillette, Torrington or Casper, so was able to use the grant money to pay for hotels near those clinical sites.” Felicia McAfee from Laramie said her parents have been supporting her two brothers and herself through school, “which has been hard on them financially,” she adds. “The scholarship has taken away a great deal of stress and has decreased my financial burden.” Sheron Cox from Evanston sums up Fitch, Banet and McAfee’s sentiments: “RWJ scholarship was a phenomenal contribution towards my nursing education, helping to pay for traveling expenses, books and tuition. I am grateful for RWJ scholarship and am honored to be a Robert Wood Johnson Scholar.”

(l-r) Jonathan Banet, Sheron Cox, John Fitch, Felicia McAfee



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## HEADS-UP! ALL NURSING ALUMNI



### CALENDAR ITEMS TO NOTE

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#### HOMECOMING FRIDAY, OCTOBER 17

9–11 a.m.: School of Nursing Open House  
1:30–3 p.m.: Discussion

Health Sciences Center Room 364. Gaurdia Banister (pictured on front cover), 1982 graduate from FWWSON, is receiving a distinguished alumni award at UW this fall. She will hold an informal discussion about interprofessional education with faculty, students and alumni. Please join us!

#### COMING IN 2015

We are working to develop a nursing chapter of the UW Alumni Association. A nursing chapter will be significant in meeting your needs as alumni. We believe the chapter will also meet school needs in regard to keeping in touch with our most precious asset—you! We hope the nursing chapter will make mentoring partnerships possible between you and students seeking similar career paths, for instance. Look for more on this exciting topic in January 2015.

The University is committed to equal opportunity for all persons in all facets of the University's operations. All qualified applicants for employment and educational programs, benefits, and services will be considered without regard to race, color, religion, sex, national origin, disability or protected veteran status or any other characteristic protected by law and University policy.