A YEAR OF FIRSTS
Nurse residencies ease transition into practice

TEACHING TEAMWORK
Interprofessional practice starts with students

LEADING THE WAY
DNP path to advanced practice
In just over two years, Signe Skott Cooper Hall has become a popular study spot for students in a variety of health sciences, including nursing, medicine and pharmacy.
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Welcome to the third—and my first—issue of ForwardNursing! I am honored to serve as the eighth dean of the University of Wisconsin–Madison School of Nursing. It is my privilege to build upon its proud legacy and to share the stories of our impact and leadership. This school has been critical to the development and advancement of the Wisconsin nursing workforce for nearly 100 years, and it has always been a collective effort. I appreciate the continued dedication of our alumni, friends, faculty, staff and students as we lead to the future of health and healthcare—for Wisconsin and the world.

In this issue, you will learn more about how we are living out our mission and making progress toward our strategic goals to expand our research, educate nurses for the future of care and partner to improve health outcomes through innovation.

We feature a story about our evolution toward interprofessional learning and collaborative practice. Long before accreditation required it, the School of Nursing recognized the value of interactive learning across the health professions. Nurses have always been part of healthcare teams, and evidence shows us that those teams work better together and deliver better patient care when they understand and respect each other’s roles and responsibilities. Through our curricula, teaching strategies and collaboration with our colleagues in the health professions, we prepare our graduates to participate in highly functioning healthcare teams, ultimately improving the quality of health and healthcare for our communities.

Of course, no matter how well we prepare our graduates, some facets of nursing practice cannot be learned from a practicum, textbook or simulation experience. Nurse residencies, including the program at our partner UW Health, provide a safe and supportive environment for new nurses to transition to effective and competent practice. In our cover story, Kelsey Douglass-White ’15, a recent graduate of our undergraduate program and the UW Hospital nurse residency program, shares her insights into her first year as a nurse. Kelsey’s moving, personal account of her first code blue reminds us all of our early clinical experiences and the benefits of mentorship.

We also learn about the educational experiences of another one of our BSN graduates and current DNP students, Troy Lawrence ’10. His story reveals the familiar challenges many of our graduate students face: that of juggling work, family and education. Yet despite the demands on his time and energy, he remains steadfast in his determination to improve patients’ lives through practice, advocacy and leadership. We feature Troy, but he is one of our many, many talented, ambitious students who are eager to change the world—as nurses.

You will also find news about the launch of our accelerated undergraduate program, a formal partnership with UW Health to support ongoing collaboration in research, practice and education, and awards supporting the advancement of our research enterprise. Our magazine covers a broad territory, and our stories reflect the diversity in practice and experience that we find in the nursing profession itself.

Sincerely,

Linda D. Scott
Dean and Professor
University of Wisconsin—Madison School of Nursing

At the University of Wisconsin—Madison, nurses lead.
They lead to the future of health and healthcare, for Wisconsin and the world.
The School of Nursing is launching an accelerated bachelor’s degree program in May 2018. The 12-month program will be open to students who already hold a degree in a different discipline.

The school awarded $800,000 in scholarships to 323 BS and DNP students for the 2016–2017 academic year. Every student who applied received at least $1,000 in funding.

More than 350 people gathered at the School of Nursing on October 18 to hear Dr. Deborah Trautman, PhD, RN, FAAN, President and CEO of the American Association of Colleges of Nursing, speak about leadership opportunities for nurses and the role of education in preparing nurses for contemporary care settings.

In a broad-ranging presentation, Dr. Trautman noted that schools of nursing are instrumental in developing nursing professionals who can drive change and improve health and healthcare. She called on nursing schools to prepare nurses to care for increasingly diverse patient populations and to practice as members of interprofessional healthcare teams. She also encouraged greater partnership between academia and nurses in practice.

Dr. Trautman was the seventeenth Littlefield Leadership Lecturer. Named after Dean Emerita Vivian Littlefield, who led the school from 1984 through 1999, the annual lecture welcomes national nurse leaders to share their insights and experiences in advancing healthcare and nursing practice. Visit http://go.wisc.edu/7727vt to watch Dr. Trautman’s presentation.

Thank you to the 11% of alumni (that’s up from 9% just a year ago) who made financial gifts to the school as part of the Wisconsin Foundation and Alumni Association All Ways Forward comprehensive campaign, a five-year effort to increase funding to increase scholarships, enhance learning opportunities, recruit and retain faculty, and advance research and discovery. Help us reach our goal of 20% of alumni participation by 2020 allwaysforward.com

Many thanks to GE Healthcare for donating a Panda Warmer to the school’s Center for Technology-Enhanced Nursing (CTEN). The warmer, located in the hospital suite, is used in childbirth simulations. Exposing students to equipment they will find and use in the workplace builds familiarity and confidence, easing the transition into practice.

School of Nursing faculty, staff and students led campus-wide volunteer efforts by working more than 1000 hours during the meningitis immunization B drive, during which 20,500 vaccines were administered.

The school welcomed SEVEN new faculty members. Dr. Eileen Kintner, PhD, RN, FAAN, researches asthma self-management in older school-age students. She came to Madison from the University of Texas–Austin to fill the Mary and Carl Gulbrandsen Chair in Pediatric Nursing. Assistant Professor Andrea Gilmore Bykovskyi (’09, MS ’10, PhD ’14), RN, focuses on improving health service delivery and outcomes for persons with dementia. New additions to the clinical faculty include Pamela Guthman, DNP, RN, Elizabeth Collins, MS, RN, and Kyoko Schatzke, MS, RN, who teach in the undergraduate program. New clinical faculty in the DNP program include Chandra Norder-Brandli, DNP, APRN, and Suzanne Wallace, DNP, APRN.

Four nurses with ties to the UW–Madison School of Nursing are featured in the Wisconsin Foundation and Alumni Association’s Project 72 campaign, which highlights UW connections with the people and communities of every Wisconsin county. Current student McKenzie Capouch represents the School of Nursing and Trempealeau County.

UW Health and the School of Nursing entered into a historic partnership agreement, effective from July 1, 2016 to June 30, 2017. The collaboration is a formal effort to work together to improve health outcomes by advancing nursing education, practice and leadership and facilitating research.

“Our two organizations have a long history of partnership,” says Susan Zahner, DrPH, RN, FAAN, associate dean of faculty affairs. “The School of Nursing and UW Health can do more to advance health and wellness when we align deliberately and strategically, as this agreement enables us to do.”
Clinical Professor Paula Jarzemsky partners with health-professions colleagues from across campus to prepare students for real-life practice.

Do you eat any fruits or vegetables?
Yes, Millie responds. She does. She usually buys canned produce because it lasts longer. She especially loves fruit cocktail.
The nursing student is satisfied with the answer and makes a note to talk about sugar intake. Then an OT student chimes in.

How do you open the can?
“I start with a can opener,” Millie answers, “but sometimes I have trouble getting it all the way around because of my arthritis.”

So what do you do then?
“I jab at it with a knife,” she says.

It was an important moment.
“That single exchange nailed the objective of this exercise and underscored the value of interprofessional education,” says School of Nursing Clinical Professor Paula Jarzemsky, MS, RN.
The exercise was a simulation in the School of Nursing’s Center for Technology-Enhanced Nursing, or CTEN, which is outfitted with an apartment designed to help students practice home health visits. Millie is lying in bed, and four University of Wisconsin students—two nursing, two occupational therapy—are tending to her. One nursing student asks about her diet.

Teaching Teamwork

by Jennifer Garrett
Photography by Alexander André
the manikin voiced by different instructors behind a two-way mirror who prompt students with comments designed to drive home learning objectives. In this case, the goal was to help nursing students recognize the unique and valuable input that OT students bring to home health visits and vice versa.

And it worked.

“In the debrief, the OT student said she would never have asked about Millie’s diet, and the nursing student said she would never have asked how Millie opened the can of fruit cocktail,” Jarzemsky says. “Both pieces of information were crucial because they exposed a real safety risk, and neither student would have discovered it without the other.”

Nursing faculty members Paula Woywod, Kari Hirvela and Barbara J. King, along with Debbie Bebeau, a clinical assistant professor in the UW–Madison Occupational Therapy Program, developed the simulation last summer with a Bader Foundation grant. Interprofessional educational experiences like this one are growing more common as scientific evidence points to the benefits of improved communication and collaboration among members of healthcare teams.

Jarzemsky originally grew interested in interprofessional collaborations nearly a decade ago. She heard from colleagues in practice that new nurses often struggled with determining their roles and responsibilities with respect to other providers. They eventually figured out how to work alongside each other but not necessarily together.

That was not a surprise. At that time, future nurses learned primarily with other future nurses. Physical therapy students learned with other physical therapy students. While some students from different disciplines interacted in programs and projects outside the classroom, most of their formal learning occurred in discrete silos.

Jarzemsky reached out to Bebeau to explore the possibility of teaching students together in an exercise designed to clarify roles and, as in the apartment simulation with Millie, show how collaboration could lead to better outcomes for patients. Bebeau thought it was a great idea from the start.

“I didn't have any interprofessional education as a student,” Bebeau says. “My first job was in a level-one trauma center, and we operated minute to minute. That was my first experience working directly with nurses, and it took me a while to learn how we came together, where we overlap, where we didn't and how we view patients and situations with different lenses.”

Bebeau credits Jarzemsky for spearheading many interprofessional learning opportunities for UW health professions students. “She has been a real igniter and she’s still going,” Bebeau says. “Just today we found two more places where we could intersect.”

Jarzemsky and Bebeau also work together every autumn at a fall-prevention workshop that brings together UW–Madison nursing, OT, physical therapy and pharmacy students to provide free screenings for older adults. Nursing students take blood pressures and conduct vision tests. The OT students conduct home safety assessments. Pharmacy students look for drug interactions that might lead to dizziness, and PT students assess mobility. Results are tabulated to generate a fall-risk score at the end.

The project also provides a valuable community service with real impact. A follow-up survey conducted a month after the event reveals that 77% of participants had initiated their individualized action plans. Jarzemsky says a 25% implementation rate is typical. “We need to do more research, but we believe the interprofessional nature of the workshop contributes to that high initiation rate,” she says. “Those improved outcomes really speak to the value of this kind of learning.”

That is a big part of what motivates Jarzemsky to identify and offer other interprofessional learning opportunities. Another of her favorites involves second-year nursing and third-year pharmacy students working together to respond when a patient’s condition deteriorates. The scenario takes place in the CTEN hospital suite and calls for medication reconciliation, anticoagulation therapy and discharge teaching—all situations that require pharmacists and nurses to work closely together in real life.
Comedy Night at the ICU?

Healthcare is not a laughing matter. We want our providers to be skilled clinicians—not comedians. Sure, it is nice when they can lighten the mood when things get too serious, but they do not need to keep the team in, well, stitches.

So what did 14 health profession students and practitioners expect to gain from “Improvisational Theater for Health Professionals,” a six-week, one-credit course offered by the UW School of Medicine and Public Health?

“A lot of people know improv as a form of sketch comedy, and it is that,” says Assistant Professor Amy Zelenski, who developed and teaches the course. “But improv really pulls together many skills that are necessary for communication in the healthcare environment and teaches healthcare professionals to work together and support each other.”

Zelenski says improv techniques are great for learning to listen closely, imagine others’ perspectives, respond authentically to others’ emotions and tap creativity in stressful moments.

School of Nursing Clinical Professor Paula Jarzemsky, MS, RN, took the class last spring. While initially skeptical, Jarzemsky says she learned new strategies to resolve conflict and to approach difficult situations. “It was way outside my wheelhouse, but I learned a lot,” Jarzemsky says. “We can’t often see how our own biases about our training and disciplines affect the way we work as a healthcare team, and this experience really opened my eyes.”

Zelenski developed the course, basing it on an established Watson/Northwestern Medical Improv curriculum and work from the Alda Center for Communicating Science at Stony Brook. She intended all along to make it interprofessional.

“The more we train together, the better able we are to work together when we’re out of training,” she says.

While the course is currently in the pilot stage, Zelenski is working to make it a permanent offering for UW–Madison health professions students and local providers.

“The pharmacy students, who typically have had less exposure to clinical settings, see that it is the nurses who recognize and respond when a patient’s condition changes,” Jarzemsky says. “Nursing students begin to appreciate the value of their experience, and that’s a real boost for them. They see that they’ve come a long way in just a year.”

Jarzemsky says that while coursework explores the roles of other health professionals, some insights into how they practice together come only from interaction. And those insights, she notes, are important not only for the health professionals but also for the patients. Research has shown that when providers break down perceived hierarchies and function well as a team, they deliver better care. That improves patient satisfaction and outcomes.

Indeed, it is widely accepted that highly collaborative interprofessional practice is good for patients. In 2001 the Institute of Medicine called on academic institutions to begin teaching health professionals to work more collaboratively because of evidence pointing to increased healthcare quality and safety. Eight years later, six national health profession education associations, including the American Association of Colleges of Nursing, formed the Interprofessional Education Collaborative (IPEC) and promulgated standards and core competencies for interprofessional education. Funders, too, such as the Health Resources and Services Administration, part of the U.S. Department of Health and Human Services, frequently look for interprofessional collaboration during research and discovery.

The UW–Madison School of Nursing identified the expansion of interprofessional education as one of its strategic initiatives for 2016–2020, and it will be home to the new UW Center for Interprofessional Practice and Education. Led by School of Pharmacy Dean Emerita Jeanette Roberts, CIPE will foster and facilitate interprofessional learning opportunities for students and professionals.

“The stars and moon are aligning,” Jarzemsky says. “I hate to think of it as a stick, because once people start doing these activities, they realize there’s a more of a carrot at the end. It is valuable, and some of these concepts are hard to teach in any other way. And, it really is a lot of fun to work with people from other disciplines.”

© Alexander André
Dean Linda D. Scott has swiftly charted a course for the University of Wisconsin–Madison School of Nursing to affirm and sustain its status as a preeminent nursing school. During her first few months on campus, Dean Scott listened to and gathered perspectives from the school’s community—staff and faculty who deliver on the school’s mission, partners who extend the impact of the school’s work, and people who benefit from a collective commitment to academic excellence, research expertise and practice innovation.

“It has been a wonderful transition,” she says. “In talking with many groups and individuals over the past several months, I heard a clear commitment to the success of the school as well as a desire to operate strategically, intentionally and collaboratively.”

As part of her effort to leverage resources, capitalize on strengths and position the school for greater success, Dean Scott has begun an organizational transformation. She is aligning resources to strategically advance the school’s research, education and practice mission, while positioning the school for long-term sustainability. She has redoubled recruitment efforts to fill five new tenure track positions, which will expand faculty ranks and support for signature research and practice areas. She has reaffirmed the efforts of staff as they continue to develop innovative programs and services and increase the visibility of the school. Her meetings in the community indicate that the school’s partnerships continue to flourish and new ways of thinking about the future are surfacing.

“We have much to celebrate about the School of Nursing, and we have great opportunities ahead to improve upon how we advance the discipline of nursing and the role of nurse leaders,” says Dean Scott.

The looming shortage of nurses adds emphasis to the importance of her work as does the current financial landscape.

“Ongoing investment in nursing and the School of Nursing is crucial to the health of our communities,” she says. “We are building a strong case for support and welcome the opportunity to demonstrate our impact on workforce needs and health outcomes.”

As the school approaches its centennial celebration only eight years away, Dean Scott is prepared and excited to bring the school, campus and nursing communities together around a shared vision of success with a clear plan for making that vision a reality.
It was my third shift working with my preceptor. Let’s call her Ann. A co-worker of mine was swamped, but they had a patient who needed a second IV placed. They asked if I could help.

Feeling confident about my IV-start skills and with my preceptor by my side, I jumped at the opportunity. Unfortunately, my “jumping” turned into tripping over the patient’s current IV tubing, and I dislodged it entirely. I could feel my cheeks flush. The tears were coming. I began to panic. My preceptor? She laughed. The situation did not feel funny to me.

I worked with her to replace the initial line and add a second. Then she sat me down. She told me that I would have a lot of firsts in my career. This, she explained, was my first mortifying moment. “There will be more,” Ann said.

We continued to talk, and she encouraged me to write down my “firsts”—the first things that are tough, the first things that make me proud, the first things that change me. She said the record would be valuable—that someday I would look back on it and see how far I had come. That, she said, would make the bad days easier and would help me remember some of the milestone accomplishments that I would eventually take for granted.
At first I dismissed her advice. I was not struggling. I was just frustrated because I had been clumsy. Only a few months later I was struggling, and the “firsts” were still coming. I did not trip over IV tubing again, but I made other mistakes. I paged pharmacy multiple times for a medication that was in the refrigerator the entire time. I mixed up carbohydrate counts and had to repeat my calculations to determine the correct dose of insulin.

Many days I came to work feeling anxious and overwhelmed. I had been there long enough to recognize how much I knew, and I realized it was not very much. That was humbling. I began to question both my ability and my decision to become a nurse. So I decided to follow Ann’s advice. I hadn’t been keeping track of my firsts, but I began to do exactly that. My first IV. My first rapid response. The first time I got a grumpy patient to crack a smile. The first time I sat and listened to someone’s life story of misfortune, poor health and loss.

And then the first time I watched someone die.

The patient, I’ll call her K.K., had been on the unit for over a month. She had survived complication after complication following a surgery, but she had essentially given up her will to live. Even so, I had not given up on K.K.

One day a physical therapist went to work with K.K. I can still picture her coming out of the room immediately after going in. Her face was panicked, and she called to the nurses’ station for help. K.K. was pale. She was not responding. She would not wake up.

I was not assigned to K.K. that day, but I sprinted to the room alongside another nurse on our unit. I quickly noticed that K.K.’s fingertips were blue. Her body was white. Neither of us could find a pulse. My colleague announced that she was going to call a code. My first.

Things started happening fast. I found the CPR release on the bed and immediately started compressions. The room suddenly filled with people. I had been through CPR training, but doing it on an actual body without a pulse was very different. I don’t remember anyone ever telling me that I would feel ribs crush with compressions.

I was very, very upset, but my training and preparation kicked in. Instinctively, I kept up the compressions. Time slowed. I was mesmerized by the constant motion that seemed almost choreographed. The code became a trance. I was afraid if I stopped what I was doing, I wouldn’t be able to move at all.

Eventually my arms grew tired. My colleagues noticed. We rotated positions every two minutes to keep compressions strong. When it was my turn to start compressions again they encouraged me, complimenting my technique. At one point someone sang “Stayin’ Alive” in my ear when I was compressing too fast. It helped slow my rhythm.

I had lost sense of time, but I know now that we worked for 20 minutes before the physician called it and K.K. was pronounced dead.

At that moment the intensity gave away, and the atmosphere of the room shifted. Doctors and nurses tossed their isolation gowns aside and wheeled equipment out the door. As the room emptied, I lingered behind. A co-worker joined me, and we began the work that comes with death.

We learned that K.K. would not be a coroner’s case, so we cleaned the body and the room. We changed linens. We repositioned the arms, the legs, the head.

We worked together in silence. When we finished, we bowed our heads. Then I did something I had not done in a long time: I prayed. I offered a simple prayer and a blessing to the universe for her. And then I cried.

I carried those feelings with me throughout the rest of my shift. My co-workers offered encouragement and hugs. They shared words of strength and comfort. I vividly remember their support.

Until that day, I had been terrified throughout my nursing education and the first months in practice of this exact situation: A code blue. Yet at that moment I realized something that I had been questioning. I knew what to do when the code was called. I knew how to perform CPR. I knew to rely on my colleagues and trust their guidance and expertise. I knew I was prepared for this.
In the months after K.K. passed, I wrote down many more firsts. I recorded the challenging situations, moments of triumph in my practice and moments when I felt defeated by patients, outcomes or merely the day.

I finished the nurse residency program last summer. When I did, I looked back at my experiences and found myself reflecting—just as Ann said I would do. What I noticed as I revisited those days was that my memories and feelings were drawn not to the technical skills but rather to the people who were there by my side through it all. I recall the co-workers who jumped in to help me through my lowest moments. I remember how grateful I was when I was able to return the favor and help someone shoulder the burden of disappointment, frustration or loss.

In fact, every instance in this journal mentions someone who guided me through a situation, who encouraged me to try again, who helped me grow into a better person. It was then that I discovered I had become a part of a unique community of beautiful people called nurses.

I realized, too, that Ann had been right. Although I expected my residency to teach me new nursing skills—and it did—it also taught me something about myself. Despite my early confusion and doubt, I now know for a fact that this is exactly where I belong.

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**DID YOU KNOW?**

UW Hospital hired 49 UW–Madison graduates in 2015 and 57 in 2016.

The School of Nursing partners with UW Health on the nurse residency program. A school liaison serves on a nurse residency committee to learn what challenges recent graduates face in the workplace. Those insights, in turn, lead to refinements of the undergraduate program. This continuous information loop between the school and the health system helps increase the likelihood of success for new nurses as they enter the workforce—and that is good for the nurses, the school, the health system and patients.

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**A Better Start**

Before implementing its nurse residency program in 2004, UW Health struggled—as did many health systems with academic hospitals—with high turnover among its new nursing hires. Many left not only the hospital but also the nursing practice. Nurse residency programs were designed to change that.

In its transition-to-practice program, UW Health clusters residents in cohorts of 30 to 40 new hires with four or five start dates scheduled throughout the year. Residents are hired into a specific unit and are assigned a preceptor. Cohorts meet once a month for a class focused on specific aspects of care, and each class ends with a reflection period. Residents must also complete an evidence-based practice project.

Cate Virnich ’15 was hired as a resident at University Hospital (F6/5) in July 2015. She says the classes offered a break from the intensity of her unit and provided a structured way to gain practice skills and master hospital-specific policies and procedures. Virnich also learned strategies to help her prioritize her workload and keep a healthy perspective on her job. She especially enjoyed the reflection period at the end of each class.

“It really helped with stress,” she says. “It was nice to hear my peers talk about their experiences and realize that everyone is going through the same things.”

That first-year stress was the reason so many new nurses were leaving the hospital before it offered a residency program, says nurse residency program coordinator Kim McPhee, MS, RN-BC. She says many nurses assumed they were out of their league when they were really just new. “You can’t learn everything in nursing school,” she says. “There just isn’t enough time.”

Since implementing the residency program, the UW Hospital new-hire retention rate has consistently topped 90%.

Virnich says the program was invaluable. “It’s such a challenging job,” Virnich says. “I wasn’t expecting to feel as comfortable with being a nurse as I am already after just a year.”

— Jennifer Garrett

Photography by Alexandre Andrè
Global Health Is Local Health
by Karen Solheim, PhD, RN, FAAN

By now most of us have seen images of refugees fleeing Syria to escape persecution, conflict and inhospitable living conditions. We hear about their harrowing journeys to new lands and the clash of cultures that can result. What is often left out is the personal experience of the refugees themselves.

I have learned through my work in global health nursing that many refugees spend years living in camps and communities that were never meant to be permanent homes. Many refugees spend years living in camps and communities that were never meant to be permanent homes. In fact, less than one percent of all refugees move to a new country, such as the United States, with the intent to become permanent citizens in what is known as resettlement.

Resettlement is an arduous process. Government approval takes between 18 and 24 months, beginning with an interview in the country of asylum and continuing with a series of background checks and health evaluations by several U.S. agencies. If approved, air travel is booked and paid with a loan—the refugees are expected to repay the cost within six months—and the refugees depart their temporary camps or communities. Representatives from a resettlement agency typically meet them at their destination airport. Then they begin rebuilding their lives.

Accessing healthcare is a critical part of the resettlement effort. Refugees typically bring with them vast and varied conditions caused or exacerbated by their challenging living conditions. It is always difficult to maintain good health in countries afflicted by war and violence, and healthcare facilities in Syria have been targets in the ongoing crisis. Much of the population also lacked sufficient food for long periods prior to their escape, and some may have been robbed, exploited or raped as they fled. Healthcare within refugee camps and communities can be adequate but it is inconsistent. Basic services such as prenatal care, medication for chronic disease and home healthcare may be limited.

As a result, refugees who resettle in Wisconsin arrive with varied acute and chronic conditions, uncertain but often limited English skills, and little familiarity with how our social services, particularly our healthcare system, function. These are challenges for practitioners and patients.

Nurses, however, are uniquely prepared to address many of these concerns. Our practice routinely encompasses patient advocacy, policy development, health education, referral, community organizing, counseling and more. Our collective expertise can serve and support the refugee population right here in our local communities.

Even those of us who do not provide direct care to refugees can play a role in addressing the refugee crisis here in Wisconsin. We can begin by learning more about U.S. refugee policy and voicing our opinions to our legislators. We can host workplace seminars about addressing the unique needs of refugee patients in our clinics and hospitals. We can attend local public events for refugees or volunteer with agencies that help families resettle.

Nursing practice has always revealed to me that despite different languages, living conditions, religions, politics and culture, much of healthcare is universal. This current crisis reminds me that, as healthcare providers, we are in a unique position to improve lives. And given the complexity of our world, we can practice global health without ever crossing a border.

Visit https://www.lsswis.org/LSS/Outreach/Refugee-Immigrant-Services to learn more about how you can support refugees.
Four and a quarter years into a five-year part-time DNP program, Troy Lawrence is coming into the home stretch. He is eyeing a spring or summer 2017 graduation. It just depends on how quickly his scholarly project comes together.

That will be the last piece to fit into what has been a challenging puzzle. This semester he has class every Tuesday. On Wednesday and Thursday he is across the street at UW Health Neurology for his clinical rotation. And every Monday, Friday and Saturday he is doing intake for UW Home Health, where he has worked as a nurse for the past six and a half years.

Despite the demanding schedule, Lawrence has managed to squeeze in some extras. He chaired the UW Health Nursing Research Council and served on the 50 Star Council, a cross-functional team of UW Health employees who learn from and inform organizational leadership. He currently sits on the School of Nursing’s Center for Aging Research and Education’s steering committee and Geriatric Interest Group.

Life at home is just as full. His wife, Clare Lawrence ’08, whom he met in the trombone section of the UW Marching Band, is also a nurse. She practices at St. Mary’s Hospital, where she has worked since graduation. Together they have two young boys, Isaac, 3, and Jude, 1, both of whom were born during Lawrence’s DNP journey.

“Some days I can’t get it all done,” Lawrence says, admitting that he feels the stress of a schedule that is often just a little bit busier than he would like. But he is quick to credit Clare for adapting and adjusting their home life and her nursing career to make his education possible. He also marvels at the support he’s had from Sandy Ligon, who has been his manager since day one.

“She’s done a lot of things for me that she didn’t have to,” Lawrence says, noting that she never denied any request he made in order to keep everything in balance. “I don’t know where the faith comes from, but … I hope I don’t let her down.”

Ligon says Lawrence’s commitment to the practice of nursing along with his enthusiasm for learning were evident the moment she met him. And she says because UW Health is such a strong proponent of lifelong learning and education, all nurses interested in career development and advancement should definitely explore it. “UW Health absolutely does support higher education and encourages clinicians to pursue these opportunities,” she says.
The UW–Madison DNP Degree

The University of Wisconsin-Madison offers a post-baccalaureate and post-master’s DNP program with tracks in adult and gerontological acute and primary care, pediatric primary care and psychiatric mental health, as well as a track for the Clinical Nurse Specialist (CNS). It is a rigorous program requiring 1000 hours of clinical practice and leadership. Full-time students typically graduate in three years and part-time students in five. Instruction is blended, with some on-site courses and some work online.

Two-thirds of the curriculum focuses on clinical expertise and scholarship in order to prepare students for advanced practice. The final third focuses on policy and leadership skills, with the goal of teaching students to think critically about healthcare systems and to identify opportunities to drive improvements in practice. “Our program goes beyond advanced practice,” says program director Pam McGranahan, RN, DNP. “We prepare our graduates for translational practice, to put research into action and to look for ways to make things better.”

McGranahan says faculty members work closely with students to determine appropriate clinical placements that grow increasingly complex and challenging over the course of the program. Offerings include urban and rural settings and diverse practice environments. “Our people look out for our students and their interests,” she says. “Our graduates go on to accomplish great things. The DNP is just the beginning for many of them. These are people trying to make the world a better place.”

The American Academy of Colleges of Nursing first recognized the DNP degree in 2006 and recommends it for entry to advanced practice nursing.
Scenes

A look at what’s happening with our students, faculty, staff and alumni
1. Students gather in the Cooper Hall atrium during the annual pre-nursing social. Students interested in nursing get a chance to learn about the program, network with faculty and staff, and tour Cooper Hall.

2. Professor Diane Lauver, Jean Johnson, cert ’47, BSN ’48, Thelma Wells, Dean Emerita Vivian Littlefield and Judy Broad at the annual Littlefield Leadership Lecture in October.

3. Solvei Adams, school nurse at Hawthorne Elementary in Madison, reviews an “Iggy the Inhaler” comic book at the October Healthy Learner Collaborative event in Signe Skott Cooper Hall’s Curran Commons. The Healthy Learner Collaborative includes representatives from K–12 schools, healthcare organizations and higher education institutions in the Dane County area.

4. Producer Katy Sai of Storybridge.tv prepares to interview Assistant Professor Kim Gretebeck about her PALS exercise program for older adults. The Storybridge.tv crew visited Cooper Hall in October to shoot a segment on PALS that will air on the Big Ten Network.

5. Kristi Hammond, DNP program coordinator, and Karen Mittelstadt, assistant dean for academic programs, scoop Babcock Hall ice cream at the Interprofessional Ice Cream Social hosted by the student-run Interprofessional Health Council, in the Health Sciences Learning Center in September.

6. Professor Emerita and Board of Visitors member Pat Lasky, her lifetime partner John Hanrahan and his sister Anne Flach watch the Homecoming game from the Nurses Alumni Organization ticket block.

7. Clinical Professor Karen Solheim, PhD, RN, FAAN, director of the undergraduate nursing program, explains the new concept-based undergraduate curriculum, which is currently in development.

8. Phyllis Jacobs ’65 examines the Vision History Wall leading to the Cooper Hall atrium during reception for Bunge Society members in September. The Bunge Society recognizes donors who have cumulatively given or pledged $10,000 or more to the School of Nursing.

9. Emily Baltisberger, Chardae Mara and Jessica Greshek along with Malawian children, salute UW–Madison during a global immersion clinical program in Malawi last summer. Nursing students conducted community assessments and led health education sessions during their three-week course.

10. First-year nursing student Jamie Trembula takes the blood pressure of a fall-prevention workshop attendee in September.

11. Three sandhill cranes visited the Cooper Hall courtyard over the summer.

12. First-year nursing student and former SOAR peer advisor Saba Moges and her brother Matt Moges pose for pictures following the second annual White Coat Ceremony, the School of Nursing’s formal welcome to new nursing students.
Keeping up with Alumni

1960s

Dr. Joanne M. Disch ’68 was unanimously elected the chairperson of the Aurora Health Care board of directors. She is the first nurse in this important role for the largest integrated healthcare system in Wisconsin. “I am honored to serve as the chair of the board of directors for Aurora Health Care,” Disch says. “Aurora Health Care’s consistent delivery of high-quality, affordable care has made it a national leader, and I am pleased to be able to guide Aurora as the organization continues to elevate its efforts in helping people to live well.”

Deborah Frank ’70 and Jerilyn Pearcy

1970s

Thanks to Jerilyn (Ballweg) Pearcy ’70 and Deborah Frank ’70 for visiting Signe Skott Cooper Hall in August! Jerilyn is an adjunct assistant professor at the Milwaukee School of Engineering (MSOE) School of Nursing and currently resides in Brookfield, Wisconsin. Deborah, a retired professor of nursing at Florida State University in Tallahassee, is currently engaged in clinical practice as a marriage and family therapist. They write: “We were awed by the uniforms we wore on display illustrating the dress of the 1960–1970 era. We would love to hear from Mary, June, Patty and Sharon.”

Pamela Mielke ’71 retired this summer after a long, happy and successful nursing career. Her career has taken her from Madison to Virginia Beach, Virginia, where she now resides.

Patricia Ann Schelinski ’75 is retiring this year after over 40 years of dedicated nursing in the Banner University Medical Center—Phoenix trauma ICU.

Thomas A. Neumann ’77 retired this past year after a rewarding 37-year career as a registered nurse in direct care, education and administration. During the final years of his nursing career, Thomas was a tenured associate professor in the BSN completion program at Viterbo University in LaCrosse, Wisconsin. He has given back to the nursing profession through service on various leadership boards in Wisconsin. He was awarded the Excellence in Nursing Leadership Award from the Wisconsin Nurses Association in 2000.

Thomas writes: “I am grateful for and proud of the excellent education that I received from the UW–Madison School of Nursing, [and] thankful for the many very competent and caring nurse colleagues whom I have met over the years. They exemplify the values we learned as students at UW–Madison, values that continue to be passed on to the graduates of today.”

Eileen Statz ’78 was nominated for the 2016 UW Health Clinic’s Working Mother of the Year award. Over the course of her 38-year career she worked as a nurse clinician, nurse manager, associate clinical nurse specialist and program coordinator at UW Health. During that time she also raised three children, cared for aging parents and in-laws, and welcomed three grandchildren. Congratulations, Eileen!

1980s

Betsy Engelking ’82 is currently in the Boulder Community Health’s RN Float Pool, where she has been practicing for 30 years. In her spare time, she enjoys tutoring current nursing students. Betsy writes: “I remain proud to be a grad from UW–Madison. You guys taught me to be always learning, to question all procedures, and to look for where the evidence is behind them. You guys were teaching evidence-based practice even back then.”

Congratulations, Eileen!

Bruce Grau ’84 has started a new chapter in his nursing career as a palliative care nurse practitioner.

2000s

Congratulations to Feng (Vankee) Lin MS ’09, PhD ’11, assistant professor at the University of Rochester Medical Center School of Nursing. Lin has earned a $2 million National Institutes of Health grant to determine if a computer-based training program can lower a person’s risk of dementia. Lin will lead a four-year study testing vision-based speed of processing (VSOP) cognitive training and its effect on slowing cognitive decline in adults at risk of developing Alzheimer’s disease or other forms of dementia. Lin also received the Council for the Advancement of Nursing Science’s 2016 Brilliant New Investigator Award in recognition of her research program.

“My student life at UW–Madison SON was one of the happiest periods in my life so far,” Lin says. “I gained tremendous personal support and
Linda Young

Congratulations to Linda Young PhD ’10 for winning the Wisconsin Nurses Association’s Signe Cooper Image of Nursing Award. This award is given to a nurse who is involved in activities that enhance the image of professional nursing and the image of the WNA.

Best wishes to Jean Olsen ’10, who has come out of retirement to return to nursing as a nurse consultant for a major technology company. Prior to her retirement, Jean worked in a variety of nursing fields, including hospital, clinical, industrial, school and electronic health records.

Jean writes: “At the age of 63 (2010) I proudly walked across the stage in the Kohl Center to receive my BSN. I will never regret the effort it took for me to achieve this goal, [and] every moment of study and inconvenience was worth it. Prior to this, I helped put my husband and all my children through school before I was able to concentrate on this endeavor. I had opportunities to accomplish this through other programs offered, but my goal had always been to get my BSN only through UW—Madison’s School of Nursing.” Jean is ready and willing to help fellow UW—Madison nurses achieve their goals.

Kathlyn Steele, BS ’75, MS ’78, is the 2016 Nurses Alumni Organization Distinguished Alumni Award winner. Steele retired this fall from Central Wisconsin Center, where she had been the director of nursing for the past 21 years. Over the course of her 41-year career she also worked as a staff nurse, interim unit director, nursing instructor and director of staff development. With a passion for education and advancing the profession, Steele also served as a preceptor for undergraduate and graduate nursing students.

“Of all the things I’ve done, helping others do their jobs successfully or optimally in that nurse educator role has always been the most meaningful,” Steele says. Mentorship has always been important to Steele, both when she was a new nurse seeking advice and guidance and then later when she was an experienced nurse leader able to help recent graduates navigate their early years of practice.

“I started out with a really strong mentor and she’s still a close friend,” Steele says, referring to Jacki Miller, a clinical nurse specialist and director of nursing at Central Wisconsin Center. Steele notes that for more than two decades she frequently turned to Miller when she had questions or needed reference materials or other resources. “I always understood how important that was, and having that relationship with someone is very, very special.”

Kate Louther, BS ’05, MS ’10, would agree. Louther, a nursing supervisor at Public Health Madison & Dane County, was one of Steele’s mentees. She also happens to be Steele’s daughter—and the one who nominated her for the award.

“I nominated my mom for this award because I thought she embodied the School of Nursing’s mission,” Louther says. “She has done so much in her nursing career, and she should be recognized for her accomplishments and her dedication to the nursing profession.”

Louther says she has leaned on her mother from earliest days of her nursing career. Louther, who originally intended to become a physician, followed Steele’s advice and become a CNA while in high school to gain healthcare experience and save money for college. Later while at UW—Madison where she studied and earned a BS in medical microbiology and immunology, Louther sought her mom’s guidance about how to navigate her undergraduate studies when she decided she wanted to be a nurse and not a physician (Louther later earned her BSN in 2006 in an accelerated online program offered by UW—Oshkosh). Once a nurse, Louther frequently bounced ideas off her mom and went to graduate school before starting a family, again on Steele’s recommendation.

In recognition of his excellent work at Gundersen Health System, Elisha Smith ’14 was asked to accept the American Assembly for Men in Nursing (AAMN) award for “Best Workplace for Men” on behalf of GHS. Elisha works in the orthopedic unit at GHS and is actively involved with the AAMN chapter.

In Memoriam

We offer our deepest sympathies to the families and friends of those who have passed away.

Joyce Anderson ‘59, MS ’74
(August 11, 2016)

Alice Dresen ‘47
(August 28, 2016)

Duck-Hee Kang PhD ’93
(September 20, 2016)

Linda Kiesgen ‘74
(May 9, 2016)

Louise M. Rusch ‘33
(October 12, 2016)

Leona L. Stapel ’56
(June 18, 2016)

Kathlyn Steele with two of her three daughters, Beth Kucher ’09 (left) and Kate Louther MS ’10 (right)
Badgers for a Lifetime
by Marlee Stynchula

The School of Nursing is more than a place where nursing careers begin. It is a lifelong professional resource, a connection to the past, a continuous source of science and discovery and a place where alumni and nursing colleagues are always welcome. Here are a few ways to connected or get reacquainted:

Join Badger Bridge: Badger Bridge is an online tool designed exclusively to keep UW–Madison alumni, students and staff connected. The site offers a variety of ways to reconnect with fellow Badgers, give back to others as a career mentor, meet new Badgers close to home, explore new job opportunities and more. Visit badgerbridge.com to join.

“Being a Badger living out of state, I felt that it was a great opportunity to meet other folks in the Georgia area. It also allows for mentoring and discovering other Badgers in my areas of interest,” says Mary Kouba ’11, a nurse at the Empowerment Resource Center in Atlanta, Georgia. “It is a source of pride to see how many Badgers are doing outstanding work all over the globe!”

Keep us updated: We love hearing about all the places your UW nursing degree has taken you. Please continue to send updates, both professional and personal, on you and your classmates! Send all news and changes in contact information to alumni@son.wisc.edu, and be sure to include a photo!

Visit campus: Come back to Madison and celebrate the past, present and future of nursing with one of the school’s signature events. Or explore Signe Skott Cooper Hall, the school’s new home since 2014. Email us at alumni@son.wisc.edu to schedule a tour.

Give back: The generosity of the school’s alumni and friends drives the school’s growth, innovation and success. Please consider supporting current students, expanding educational opportunities, funding research or expanding our faculty. Philanthropy is great way to pay respect to the past by investing in the future. Visit supportuw.org to make a gift.

Enroll in continuing education: The learning does not stop at graduation. Build skills and advance your career with continuing education. Email us at cen@son.wisc.edu to be added to our mailing list.

Follow us: Follow us on social media, and keep up with the latest Badger nursing news.

@UWMadisonNursing
@UWNursing
@uwnursing

Marlee Stynchula is the School of Nursing alumni relations officer. She serves as a resource for alumni and works to engage alumni, students, faculty, staff and community partners.
News of Note
from School of Nursing Students, Faculty and Staff

Two University of Wisconsin—Madison School of Nursing faculty members were named to the 2016 American Academy of Nursing fellows class. Kristine Kwekkeboom, PhD, RN, FAAN, studies non-drug interventions to relieve symptoms in patients with cancer and serves as the director of the PhD program. Karen Solheim, PhD, RN, FAAN, is an expert in global health who also is leading a sweeping undergraduate curriculum redesign. Both were inducted at a ceremony during the Academy’s annual policy conference in October in Washington, D.C.

Dr. Kwekkeboom has also been named the Lillian S. Moehlman Bascom Professor in Nursing. The five-year professorship provides annual funding to support research and scholarly activities.

Assistant Professor Lisa Bratzke, RN, PhD, ANP-BC, FAHA, contributed to research that prompted an American Heart Association’s scientific statement regarding the impact of hypertension on cognitive function. Bratzke investigates the impact of heart disease on cognition, and she is involved with the Wisconsin Registry for Alzheimer’s Prevention, a leading longitudinal study that is focused on advancing the understanding and early identification of Alzheimer’s Disease and dementia.

Clinical Assistant Professor Pamela Guthman, DNP, RN, received the 2016 Wisconsin Nurses Association Community Service Award recognizing her extraordinary contributions to public education, community outreach and health promotion.

School of Nursing senior honors student Matthew Brelie won $2,500 for his essay “Stories of the Past, Lessons for Today.” The Rural Wisconsin Health Cooperative awards the Hermes Monato Jr. prize annually for an essay on rural health. Brelie’s entry (you can find it at http://ow.ly/lujE303Jx8u) was inspired by his experiences in the three-week rural immersion clinic in Rusk County.

The Patient-Centered Outcomes Research Institute (PCORI) issued an award to Linda (LD) Oakley to lead work on “A Comparative Effectiveness Randomized Controlled Trial of Mindfulness Meditation versus Cognitive Behavioral Therapy for Opioid-Treated Chronic Low Back Pain.”

University of Wisconsin—Madison School of Nursing emerita faculty members Sandra Ward, PhD, FAAN; Susan Riesch, PhD, FAAN; and Regina Dunst, MS, RN, were named Distinguished Alumni of the UW–Milwaukee School of Nursing in connection with the school’s 50th anniversary celebration this past spring.

Professors Emerita Patricia Flatley Brennan, PhD, RN, retired from the UW–Madison School of Nursing last summer to become the director of the National Library of Medicine in Bethesda, Maryland.

Current PhD candidate Lacey Alexander, RN, MS, was selected for the PhD Veteran’s Administration Traineeship. She will work with alumnae Cynthia Phelan, PhD, a nurse scientist at the William S. Middleton VA Hospital.

Dr. Kris Kwekkeboom and Dr. Karen Solheim

Assistant Professor Lisa Bratzke

Clinical Assistant Professor Pamela Guthman

Professor Emerita Patricia Flatley Brennan

Susan Zahner, DrPH, RN, FAAN, Associate Dean for Faculty Affairs, published a paper in a recent issue of Nursing Outlook. “Assuring a Strong Foundation for our Nation’s Public Health Systems: A Commentary” describes increasing threats to public health systems at local and state levels and details the impact on nurses’ abilities to prepare for public health emergencies and to provide disease prevention and health promotion services. “The ideals of health reform cannot be reached without a strong public health infrastructure,” Zahner says. “This paper strongly supports reinvestment in public health and represents the work of a group of public health nursing experts associated with the American Academy of Nursing.”

Students in the summer rural immersion clinic
Alexander is one of four UW–Madison School of Nursing doctoral students who were named 2016–2018 Jonas Nurse Leaders Scholars. Lacey Alexander, Jessica Rainbow and Katherine Mead are current PhD students. Khira Ahmed-Yahia is a current DNP student.

The program, supported by the Jonas Center for Nursing Excellence, is designed to increase both the number of doctorally prepared faculty available to teach in nursing schools and the number of advanced practice nurses providing direct patient care. Each of the 600 scholars from across the country receives $10,000 awarded over two years ($5,000 per year).

Carol Aspinwall, PhD program coordinator, says having four Jonas Scholars is a unique distinction for the School of Nursing. “We are among an elite group of universities honored to provide this opportunity for four doctoral students who will be making a difference in the years to come,” she says. “Our Jonas Scholars represent the great leadership potential for the future of nursing in practice and education.”

Associate Professor Audrey Tluczek, PhD, RN, FAAN, and Director of Diversity Initiatives Mel Freitag, PhD, worked with the Great Lakes Inter-Tribal Council and the Native American Center for Health Professionals, which is housed within the UW School of Medicine and Public Health, to plan the second annual Native Nations Nursing Summit in Lac du Flambeau on November 4. The one-day event was designed to inspire American Indian youth to consider careers in nursing and help them identify pathways to the profession.

The Wisconsin Network for Research Support (WINRS), a patient and community engagement center housed within the School of Nursing and led by Gay Thomas, MA, and Betty Kaiser, PhD, RN, was chosen as the patient engagement consultant for four recently funded research studies at the UW School of Medicine and Public Health.

WINRS also received an additional year of grant funding from the UW–Madison Institute for Clinical and Translational Research to continue developing resources to support Patient Centered Outcomes Research and had a manuscript accepted for publication in the peer-reviewed journal, Research in Nursing & Health. The title of this paper is “A Case Study of Engaging ‘Hard-to-Reach’ Participants in the Research Process: Community Advisors on Research Design and Strategies (CARDS).”

The School of Nursing, along with the Schools of Pharmacy and Medicine and Public Health, was awarded Joint Accreditation for six years for continuing education programming. This is the highest number of years possible to be awarded from this national organization. Sandra Galles, MS, RN, APNP, GNP-BC, continuing education program coordinator, says Joint Accreditation will simplify the process of preparing and gaining approval for continuing education activities designed for multiple healthcare team members. Without Joint Accreditation, accrediting bodies for each profession would need to ensure that programming meets their individual standards.

“We are very excited about what this means for the development of interprofessional continuing education. Joint accreditation will eliminate the duplication of effort and will enable us to more quickly develop and offer interprofessional education that addresses current needs and desires within the healthcare system,” Galles says. “More importantly, it also reflects a move toward a collaborative approach of planning continuing education by the team and for the team.”

The Journal of the American Geriatric Society published a manuscript by Assistant Professors Barbara J. King, PhD, APRN-BC, and Linsey Steege, PhD, “Getting Patients Walking: A Pilot Study of Mobilizing Older Adult Patients via a Nurse-Driven Intervention” presents the positive results of King and Steege’s efforts in developing a system-based intervention that overcomes common barriers that prevent nurses from promoting patient ambulation.

“We changed staff behavior and unit culture, increasing both the frequency and distance patients walked,” King says. “Other literature has shown that the more patients walk, the better their functional outcomes are. Our upcoming study will test the impact of our intervention on patient outcomes and healthcare utilization measures.”

Clinical Assistant Professor Tracy Saladar, DNP, is appearing on bus advertisements for Community Health Systems, Inc., on four Beloit bus routes through September 2017. The health system chose to feature Dr. Saladar, a certified pediatric nurse practitioner, to recognize her professionalism, efficiency and compassion. Community Health Systems serves patients in Beloit, Janesville and Darlington.

Community Health Systems bus advertisement

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In October, the University Professional and Continuing Education Association (UPCEA) awarded the BSN@Home program the 2016 Celebration of Excellence Award for Mature Program. UPCEA is the leading association for professional, continuing and online education and serves more than 400 institutions, including most of the leading public and private colleges and universities in North America.

The Mature Program award recognizes established credit or noncredit programs that have demonstrated sustained innovation. The BSN@Home program, which celebrated its 20th anniversary in 2016, has enabled more than 1,800 registered nurses to continue their education and earn a bachelor’s degree. Established as the Collaborative Nursing Program in 1996, BSN@Home is a collaborative program offered by six UW System campuses.

Several current graduate students have earned honors. Anne Roll, BSN, MS and current PhD student, received the Sage Best Graduate Student Paper Award from the Western Journal of Nursing Research and the Midwest Nursing Research Society for her paper “Promoting Healthy Aging of Individuals with Developmental Disabilities: A Qualitative Case Study.”

Anne Roll

Natasha Crooks ’13, RN, BSN, and fourth-year PhD student, received a prestigious Ruth L. Kirschstein Institutional National Research Service Award from the National Institute of Nursing Research for her study “Black Women’s Perspectives about Sexually Transmitted Infection Risk: A Grounded Theory Study.”

Natasha Crooks
Upcoming Events

Learn more about these events and others at son.wisc.edu/events.htm

Wednesday, February 15  4–6 pm
Enhancing Diversity in the Nursing Workforce
Join nursing colleagues in Cooper Hall for a panel discussion and resource fair.

February 27, 5–7 pm
A Shot to Get Connected
Explore nursing career opportunities at the second-annual Student Nurses Association speed-networking event for students, alumni and faculty.

Friday, March 31 – Sunday, April 2
UW–Madison Science Expeditions
Stop by Signe Skott Cooper Hall on Sunday, April 2 to see the science of nursing in action.

Tuesday, April 11 – Wednesday, April 12
Nursing Research Poster Fair
Visit the UW–Madison Health Sciences Learning Center atrium to learn about current research, evidence-based practice and quality improvement projects conducted by nursing faculty, staff and students from UW Health and UW–Madison School of Nursing.

Friday, May 12 – Sunday, May 14
Celebrate commencement weekend, which wraps up with Convocation on Sunday, May 14.