

GWNURSING

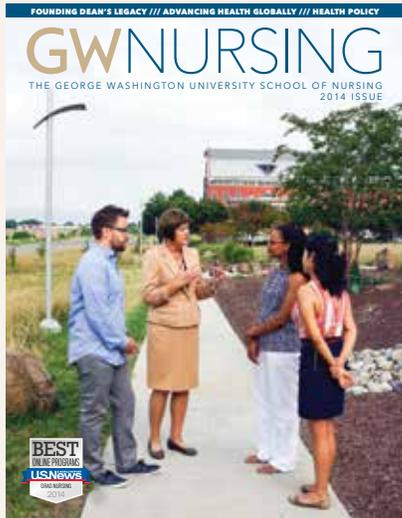
THE GEORGE WASHINGTON UNIVERSITY SCHOOL OF NURSING
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BEST
ONLINE PROGRAMS

& WORLD REPORT
U.S. News

GRAD NURSING
2014



On the Cover

Accelerated BSN students Michael "Mickey" Parsley, Tiffani Houston, and Nubia Sanchez talk with Dean Johnson.

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Jean Johnson, PhD '93, RN, FAAN
Dean and Professor

Ronna Halbgewachs, MA, MBA '00
Assistant Dean for Strategic Management
and Policy Service Professor

GWNURSING

Managing Editor

Ronna Halbgewachs, MA, MBA '00

Contributing Editor

Jamie Freedman, MA '96

Contributing Writers

Mary Dempsey
Jamie Freedman, MA '96
Ronna Halbgewachs, MA, MBA '00
Laura Hambleton, BA
Jean Johnson, PhD '93, RN, FAAN
Erin Julius, BA
Lauren Walinsky, BA

Contributing Photographers

William Atkins
Jessica McConnell Burt
Abby Greenawalt
Erin Julius, BA
Michael Leong, BS
Barbara McGowan

Design

GW Marketing and Creative Services

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George Washington University School of Nursing
45085 University Drive
Innovation Hall, Suite 201
Ashburn, VA 20147-2604
Telephone: 531-553-8584
Email: soncomm@gwu.edu
Website: nursing.gwu.edu

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Volume 2

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DEAN'S MESSAGE



I love nursing. While it took me awhile to figure out I wanted to be a nurse, I had some wonderful experiences coming to that decision. I know nursing to be a dynamic and challenging profession and I am proud to be a nurse of nearly 40 years. Nursing has come a long way during this time. The image of the “nurse helper” has evolved to one of nurses as expert clinicians. During these 40 years, nurse practitioners have emerged as a vital source of care, nurses have a voice at policy tables, nurses lead some of the most influential government agencies, and nurses contribute significantly to the knowledge base of health care. The focus of nursing is unique—melding compassion, science, and technology to provide the highest quality of care.

It has been a true honor to be part of making nursing history at GW. When I came to GW, my major goals were to become part of the new geriatric team that had been formed and to see patients in my role as newly minted nurse practitioner. I was able to do this and so much more. I have stayed at GW for most of my career because there has never been something that I wanted to do that I have not been able to do, and that includes building nursing education and research at GW.

We offered our first nursing degree, a Master of Science in Nursing (MSN), in 2005, followed by the Doctor of Nursing Practice (DNP) in 2007, the Bachelor of Science in Nursing (BSN) in 2009, and became GW's 10th school in 2010. We are a leader in online education—ranked in the top 10 percent of nursing schools by “U.S. News & World Report”—and our online MSN is ranked No. 4 out of more than 130 programs nationwide. We have built state-of-the-art skills and simulation laboratories where students learn clinical skills and, most importantly, critical thinking and decision-making skills.

No one has ever attained significant achievements alone. I have worked with the most talented and outstanding faculty and staff I could ever imagine. Work has rarely felt like work because of these amazing people. I have also had tremendous support from President Knapp, Provost Lerman, and the Board of Trustees—whose support was essential in having a School of Nursing and one that is thriving.

GW is a very exciting university—changing over the decades from a quiet, city university to one that is nationally and internationally known and willing to take risks leading to innovative programs, partnerships, and opportunities. The School of Nursing is hard at work creating groundbreaking ways of educating our students, forming strategic partnerships, building our policy presence, and expanding our research. While we have accomplished much in a short period of time, there will always be more to do.

I look forward to my yearlong sabbatical during which I plan to pursue an executive coaching program and work on a project with colleagues at the University of Cape Town in South Africa. I will travel, write, and be ready to continue to contribute to GW and the school.

My best to everyone and thank you for all that you have done.

Warmest regards,

A handwritten signature in black ink that reads "Jean Johnson". The signature is fluid and cursive.

Jean Johnson, PhD, RN, FAAN
Professor and Dean

SCHOOL ON THE MOVE

Educational Pathways for ADN Nurses

A landmark report, “The Future of Nursing”, by the Institute of Medicine and initiated by the Robert Wood Johnson Foundation, called for strategies to help nurses advance their education, citing that nurses with baccalaureate and higher degrees yield significant benefits for patients, employers, and communities.

In response to this national call to action, GW School of Nursing offers three distinct education progression pathways designed for both recent Associate Degree in Nursing (ADN) graduates and experienced ADN nurses.

GW agreements with the Virginia Community College System (VCCS) and Montgomery College in Maryland provide

guaranteed admission into the ADN pathway options to students graduating from ADN accredited nursing programs who meet GW’s academic requirements.

The online format of SON’s ADN pathways allows students to conveniently complete coursework online and clinical preceptorships in their local communities, with mentoring from GW faculty.

The three pathways are: ADN to BSN (Bachelor of Science in Nursing), ADN to BSN/MSN (Bachelor/Master of Science in Nursing), and an ADN to MSN Bridge option.

The ADN to BSN option is an online, part-time, four-semester curriculum that allows students to work while pursuing their degrees. A special residency program at George Washington University Hospital is also available to these students.

For ADN nurses interested in earning both a BSN and MSN degree, the online ADN to BSN/MSN option incorporates courses leading to both degrees and offers four fields of study: adult gerontology

primary care nurse practitioner, family nurse practitioner, nurse-midwifery (with Shenandoah University), and nurse coaching and leadership.

Nurses with an ADN and bachelor’s degree in a non-nursing field may pursue the ADN to MSN Bridge option, through which a nurse may enter the online MSN program by taking a bridge course the summer before starting the program. The five fields of study via this option are adult gerontology primary care nurse practitioner, family nurse practitioner, health care quality, nurse-midwifery (with Shenandoah University), and nursing leadership and management.

All three pathways are designed to help nurses become more marketable and exceptional caregivers, provide enhanced career options and job security, help hospitals achieve and maintain “Magnet” designation, improve patient safety and outcomes, and increase access to care, particularly in underserved areas. [GW](#)

ADN to BSN Residency Program: Best of Both Worlds

GW School of Nursing and George Washington University Hospital (GW Hospital), in partnership with Northern Virginia Community College (NOVA), have launched an innovative Bachelor of Science in Nursing (BSN) residency program for NOVA Associate Degree of Nursing (ADN) graduates.

Six ADN graduates from NOVA transitioned into a residency during which they will earn a BSN degree via GW’s online 15-month ADN to BSN pathway while concurrently working full-time as nurses at GW Hospital. The residents’ tuition is

paid by GW Hospital, and in exchange residents commit to fulfilling three years of employment at GW Hospital following graduation from the BSN program.

New ADN nurses graduating from NOVA who are interested in the residency apply to both GW SON and GW Hospital. The program has a fall semester enrollment and is designed for students starting their first job as a registered nurse (RN).

“Everyone comes to nursing on their own path. Our job is to educate and support them in becoming the best possible nurses. The ADN to BSN Residency allows new ADN nurses to go straight into the workforce while still pursuing an education. It’s the best of both worlds,” says Associate Dean for Undergraduate Studies and Assistant Professor Billinda Tebbenhoff, DNP, RN, PMHCNS.

“BSN nurses have a broader perspective of nursing and are better

prepared for different roles in nursing that are not bedside-related,” says Instructor Michelle Rumble, MSN, RN, MPH, who serves as the adviser to the residents. BSN nurses have more advanced critical thinking and clinical skills, improved patient outcomes, and an ability to practice across a variety of inpatient units and outpatient settings. They also have a better understanding of cultural, economic, political, and social matters that affect patients and influence the delivery of health care. Moreover, BSN nurses are critical for hospitals seeking nursing “Magnet” status.

“The ADN to BSN Residency is one of the best programs to date,” says GW Hospital Chief Nurse Officer Rose Labriola, RN, BSN, MSN, EdD. “This partnership prepares new RNs for the challenges of today’s complex health care environment.” [GW](#)

New ADN to BSN/MSN Pathway in Nurse Coaching and Leadership

Access to health care is improving for millions of Americans. For many patients, nurses are their primary health care contact when dealing with chronic illnesses and conditions.

"Nurses who learn coaching skills can more effectively engage their patients," says Assistant Professor Mayri Sagady Leslie, EdD, MSN, CNM.

The School of Nursing is moving quickly to better prepare nurses to fill this need, and recently opened a Master of Science in Nursing (MSN) nurse coaching and leadership option designed for Associate Degree in Nursing (ADN) nurses.

Structured for both recent ADN graduates and experienced ADN nurses, this pathway helps ADN nurses become more marketable and exceptional caregivers as advanced practice nurses—providing enhanced career options and job security, helping hospitals achieve "Magnet" status, and improving health care in their communities.

The new nurse coaching and leadership

option is part of the school's ADN to BSN/MSN pathway opportunity. This three-year, part-time online academic offering allows students to continue working while completing coursework online and clinical preceptorships in their local communities, with mentoring from the faculty. Students enter as ADN-prepared nurses, earn their BSN in the fall of their second year, and in the spring of their second year enter the MSN nurse coaching and leadership component of the curriculum. The first cohort began this fall.

"It's important to prepare nurses as coaches because a critical nursing role is to educate patients so they can empower themselves to better health," says Assistant Professor Kate Driscoll Malliarakis, PhD, RN, CNP, MAC.

The nature of illness in this country, specifically chronic illnesses, means there is a need for coaching in the case of many patients. Weight loss is one area in which a good coach may help a patient achieve success. Chronic illnesses such as diabetes and Crohn's disease also require attention to many facets of a patient's life, from diet to medication to exercise.

"Learning specific coaching techniques will enable the nurses in this program to better help patients effect change in their lives at a different level than the average nurse," says Dr. Malliarakis. "Coaching helps the patient focus holistically on themselves toward improvement in their condition." [GW](#)



GW SON Earns Top Ratings

The GW School of Nursing once again ranked among the nation's top nursing schools in U.S. News & World Report.

GW's online MSN program ranked fourth out of more than 130 programs nationwide. Overall, GW was recognized as one of the top 50 schools of nursing in the nation, placing SON in the top 10 percent of ranked nursing schools in the United States and in the top 7 percent of the more than 730 schools offering undergraduate and/or graduate nursing degree programs.

"This national recognition illustrates our commitment to meeting nurses' demand for flexible, rigorous, and creative learning opportunities," says Dean Jean Johnson, PhD, RN, FAAN. [GW](#)



ADN to BSN students and residents Tsion Abebe, Amy Sandagger, and Julianna O'Brien at GW Hospital.

SCHOOL ON THE MOVE

New DNP and Certificate Prepare Nursing Educators

There is a national shortage of nursing faculty. Nearly 80,000 qualified nursing student applicants were turned away in 2013 with two-thirds of nursing schools pointing to faculty shortages as a reason, according to the American Association of Colleges of Nursing (AACN) report “2012-2013 Enrollment and Graduation in Baccalaureate and Graduate Programs in Nursing.” In 2013, the national nursing faculty vacancy rate was almost 9 percent, according to the AACN, and nursing schools are still creating positions to meet student demand—with most of the vacancies requiring or preferring a doctoral degree.

Compounding the shortage is the fact that “many RNs are retiring, and there is a growing need for professional nursing educators in clinical care delivery settings, such as clinics, classrooms, simulation sites, and more,” says Associate Dean for Graduate Studies Christine Pintz, PhD, RN, FNP-BC.

To help address this, the School of Nursing reached out to the Graduate School of Education and Human

Development (GSEHD), and through this novel collaboration developed a Doctor of Nursing Practice (DNP) with a nursing education concentration, as well as a Post-Master’s Certificate in nursing education. Both the DNP and certificate are offered online.

The new DNP with a nursing education concentration provides nursing practice core competencies and prepares nurses to be educators with a more in-depth foundation of teaching and learning principles, adult learning, curriculum development, and assessment and evaluation of education. The new certificate emphasizes adult learning, design and evaluation of learning interventions, and assessing the impact of human resource development efforts.

“Students come into these courses with both a passion and the highly developed skills required of the highest quality nurses. They have experience, are excellent observers, and are incredibly self-directed,” says GSEHD

Instructor Elizabeth Mahler, EdD. “It’s great to work with the School of Nursing to develop strong nursing practitioner-scholars as they progress in their professional journey.”

Faculty from both the School of Nursing and GSEHD teach courses for these nursing education academic offerings. “Having instructors from both the nursing and education disciplines is one of the main strengths of this DNP program,” says Catherine Mikelaite, a student pursuing a DNP with a nursing education concentration.

“It’s wonderful working with our colleagues in the Graduate School of Education and Human Development,” says Dr. Pintz. “Our interprofessional collaboration has created innovative academic offerings that provide nurses with core DNP nursing practice competencies while also preparing them to be faculty members at universities, colleges, and community colleges; to educate nurses and others in clinical care settings; to teach in community-based environments; to better mentor new, advanced practice, and specialty nurses; and, to address health policy. These are all critical nurse leader roles.” [GW](#)



Washington Squared

SON Partnership with Medstar Washington Hospital Center Provides Scholarships, Clinical Experience, and Jobs

Washington Squared (W^2) is a new partnership between the School of Nursing and MedStar Washington Hospital Center that offers scholarship benefits and the promise of employment to GW Accelerated Bachelor of Science in Nursing (BSN) students. This partnership

is called “Washington Squared” because it brings together the rigor of the School of Nursing academic program and the robust clinical experiences at MedStar Washington Hospital Center.

Students in the W^2 cohorts earn their BSN at the School of Nursing via the 15-month on-campus Accelerated BSN path, fulfill clinical rotations at MedStar Washington Hospital Center, and are employed at the hospital upon successful W^2 completion. GW’s Accelerated BSN is a second-degree program designed for students who earned a bachelor’s degree in another discipline and want to become nurses. The option attracts applicants ranging from recent college graduates



New Executive Leadership DNP

Not all nursing positions involve bedside care of patients. As health care evolves, nurses must play a larger role at higher levels. The School of Nursing, in collaboration with the School of Business, is answering the call through its new Doctor of Nursing Practice (DNP) in executive leadership.

Nurse executives are in high demand in all sectors of health care—clinical practices, hospitals, home health agencies, senior living facilities, nursing homes, managed care centers, community clinics, and more. GW's new DNP program also prepares nurses to better lead and manage their own private practices.

Designed for nurses who are entrepreneurial, passionate about innovation, and keen to lead organizations in new strategic directions, the Executive Leadership DNP prepares nurses leaders who understand business, finance, health policy, entrepreneurship, and intrapreneurship (that is, creative innovating within a system).

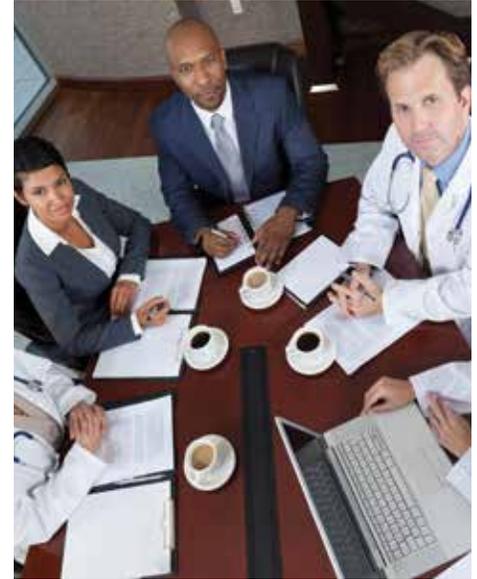
"Many nurses have learned about leadership on the job. The joy of the Executive Leadership DNP is it validates their work and stretches them academically to grow even further in their knowledge to

reach an even higher leadership level," says Assistant Professor Kate Driscoll Malliarakis, PhD, RN, CNP, MAC.

"In creating this program, the School of Nursing reached out to executive nurse leaders across the country and asked them what they saw as crucial areas in which upcoming executive nurse leaders should be prepared," says Dr. Malliarakis, and this led to discussions and ultimately an academic collaboration with the School of Business.

"We are very pleased to be engaged with the School of Nursing in this partnership," says Philip Wirtz, PhD, School of Business vice dean for programs and education, and professor of decision sciences and of psychology. "In our many discussions with the School of Nursing as this academic offering was being developed, we discovered the substantive side could quite effectively be interwoven with the business side, providing students with both solid theory and solid analytical tools. We are thrilled with the results of this collaboration."

The first cohort of students pursuing the Executive Leadership DNP began classes this fall. Structured for working nurses, students enroll on a part-time basis—taking approximately two courses per semester and completing the degree in three years. The rigorous curriculum incorporates the values within the School of Nursing vision and mission,



is consistent with the American Nurses Credentialing Center (AACN) Magnet goals, and emphasizes the key areas identified by executive nurse leaders consulted during the design of this degree.

"The interprofessional collaboration with our colleagues in the School of Business is a great experience," says Associate Dean for Graduate Studies Christine Pintz, PhD, RN, FNP-BC. "The quality of our curriculum, the faculty expertise, the collaboration between the School of Nursing and School of Business, and this new focus on leadership and health policy will not only help our students, it will help nurses to be more influential in the health care sector." [GW](#)

to mothers interested in reentering the workforce and professionals establishing a second or even third career.

"We deeply appreciate the critical thinking and professionalism these second-degree BSN students provide," says MedStar Washington Hospital Center Senior Vice President and Chief Nursing Executive Susan Eckert, MSN, RN. "That is why we are so thrilled to be partnering with the world class nursing education at GW."

W² will offer fall and spring semester enrollments each year until 2018. There are 20 students in the first fall cohort, and spring 2015 admissions are wrapping up. Prospective students interested in W²

complete the School of Nursing's regular admissions process, along with a special application for W². MedStar Washington Hospital Center has discretion in selecting the W² scholarship award recipients and clinical placements.

MedStar Washington Hospital Center clinical educators Catherine Reisenberg, PhD, FNP, PNP, RN, CS, and Dina Rosenthal, MSN, BSN, RN, have both been appointed to the School of Nursing faculty to supervise clinical rotations at the hospital and to teach in the didactic portion of W². Dr. Reisenberg also serves as the W² program director and coordinates the clinical component of the program in conjunction with Associate Dean for

Undergraduate Studies and Assistant Professor Billinda Tebbenhoff, DNP, RN, PMHCNS. Dr. Reisenberg and Ms. Rosenthal participate in faculty meetings and will serve on committees and workgroups.

"We're very pleased about this partnership with MedStar Washington Hospital Center, a major teaching and research hospital, and look forward to collaborating with the expertise of the hospital's nurse educators to educate and guide our Accelerated BSN students during their clinical experiences," says Dr. Tebbenhoff. [GW](#)

SCHOOL ON THE MOVE

HRSA Grant Supports Development of Veterans BSN

The GW School of Nursing was awarded a three-year, \$1 million grant to develop a Bachelor of Science in Nursing (BSN) designed to support veterans in their transition to the professional nursing workforce. The Veterans Educational Transition to Success (VETS) Initiative is funded by the Health Resources and Services Administration (HRSA).

The Veterans BSN initiative addresses the growing demand for health care services, especially primary care, throughout the United States; the increasing emphasis on the BSN as the minimum entry-level degree for nursing practice; and the expanding recognition that many veterans without BSN degrees possess valuable skills and training that position them well for entry into nursing career ladder programs.

"We are pleased to have been awarded this HRSA grant to develop and offer an on campus nursing degree designed for veterans seeking a nursing career ladder as civilians," says Interim Senior Associate Dean for Academic Affairs Mary Jean Schumann. "The funding allows us to provide a full



BSN student Cindy Cruzan is a Navy veteran who served our country for more than 20 years, most recently as senior chief, Hospital Corpsman.

range of supportive services to veterans and to assist their transition from combat and field-oriented medics and corpsmen to fully educated, competent nurses providing care to patients across a multitude of settings."

As the program matures, these students will be exemplars for their fellow veterans in transition. "The School of Nursing will be adding to the knowledge base of best practices that assist veterans who face unique challenges as adult students and will develop a replicable model for nursing education with the capacity to attract, retain, and graduate veterans interested in transitioning into the nursing profession," says Dr. Schumann.

HRSA, the Department of Defense (DoD), and the Department of Veterans Affairs (VA) have been working collaboratively to develop BSN career ladder programs focused on innovative educational models that award academic

credit for veterans' prior experience and training.

The new GW Veterans to BSN Initiative launches in spring 2015. Applications are currently being accepted. The degree is designed for honorably and generally discharged services members, including reservists, and veterans with a non-medical specialty, as well as active duty service members with military support for obtaining a degree while on active duty. The full-time, 15-month (four semester) program admits for the fall and spring semesters and is based at the GW Virginia Science and Technology Campus in Ashburn.

"I encourage veterans to contact us if they have interest in this career path," says Associate Dean for Undergraduate Studies Billinda Tebbenhoff, DNP, RN, PMHCNS, who also serves as the project manager of the grant. "We will work with veterans to design individualized road maps for success." [GW](#)

Inaugural White Coat Ceremony

The school hosted its inaugural White Coat Ceremony this fall. The ceremony emphasizes the importance of providing compassionate, patient-centered care to new nursing students and formalizes the students' commitment to do so. This ceremony was made possible by a grant from the American Association of Colleges of Nursing (AACN) and The Arnold P. Gold Foundation. GW was one of just 100 schools chosen to receive this funding.

At the ceremony held at Exploration Hall on the Virginia Science and Technology Campus, GW Accelerated BSN students



received their white coats and took a ceremonial oath, pledging to "accept the duties and responsibilities that embody the nursing profession." The White Coat ceremony marks the students' transition into clinical rotations.

Dean Jean Johnson, PhD, RN, FAAN,

called clinical practice the "heart and soul" of nursing. Recounting some of her own early nursing experiences, both the challenges and rewards, the dean told the students, "You might be one of those people in someone's life that they remember forever." [GW](#)

HRSA Grant Focuses on Interprofessional Health Care Teams

The Health Resources and Services Administration (HRSA) awarded a \$1 million grant to the GW School of Nursing (SON) to design interprofessional health care teams for its family, adult-gerontology primary care, and palliative care nurse practitioner (NP) students. This will help increase the number of health care providers educated in how to participate effectively in interprofessional teams, with a focus on the management of patients with multiple chronic conditions.

This programmatic grant, Collaborative Coaching for Self-Management of Multiple Chronic Conditions, will educate NP students alongside teams of other graduate health professional students, both online and in clinical situations.

Caring for patients presenting as complicated cases, such as those with multiple chronic conditions, often requires knowledge that is beyond the scope of any single provider, making collaborative work key. The Institute of Medicine recommends

health professional students learn to work as members of interprofessional health care teams, and even recommends they be educated together.

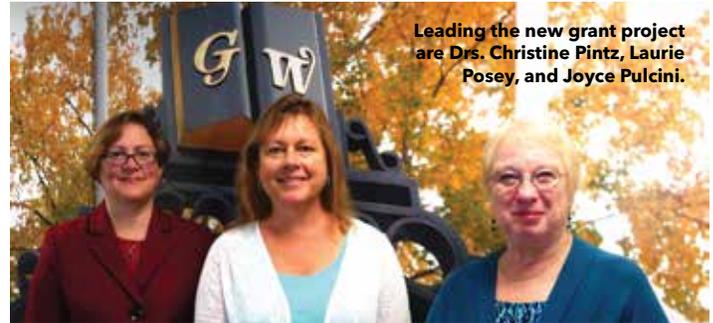
"The increasing number of individuals with multiple chronic conditions would benefit from health care delivered by interprofessional teams. But often, health professionals are not taught to work effectively with each other in the management of these types of patients. This grant will support the development of online and experiential learning strategies to help health professional students gain the knowledge, skills, and attitudes to collaborate in interprofessional teams while caring for people with multiple chronic conditions," says Associate Dean for Graduate Studies Christine Pintz, PhD, RN, FNP-BC, FAANP, who serves as principal investigator for the grant.

Other project team leaders include Laurie Posey, EdD, who is project manager and director of instructional design for the grant, and Joyce Pulcini, PhD, RN, PNP-BC, FAAN, who is a lead faculty member and director of interprofessional clinical experiences for the grant.

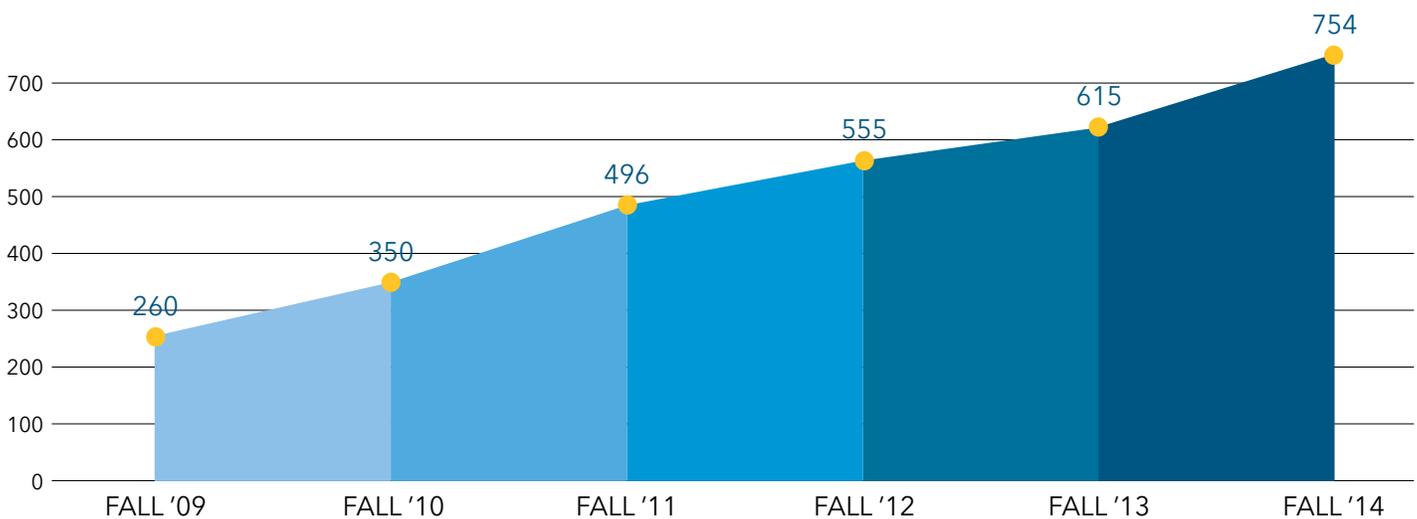
In applying for the grant, the team focused on the management of patients with

chronic conditions because they present as complex cases requiring a wide range of knowledge from health professionals. Prevention and lifestyle choices, such as physical activity, good nutrition, and regular screenings may reduce disability and death associated with some chronic illnesses. With 60 million Americans living with multiple chronic conditions, the health care system must learn how to best treat them.

Success for SON in this interprofessional endeavor benefits everyone. "The grant will provide us with the opportunity to professionally produce high-quality multimedia case studies and online learning materials for our online courses that will also be made available as Open Educational Resources (OERs) to benefit nursing and health professional programs globally," says Dr. Posey. "The materials will be packaged as individual learning objects that can be flexibly integrated into course materials and also compiled into a comprehensive online course." [GW](#)



SCHOOL OF NURSING ENROLLMENT GROWTH



JEAN JOHNSON



“Dean Johnson has been the driving force behind the tremendous growth and success of nursing education at George Washington University, from its beginning as a small department to its transformation into one of the most preeminent schools of its kind in the country. Her legacy to the field is reflected in the generations of nurse practitioners, educators, and leaders she has inspired with her deep commitment to improving health care quality.”

- STEVEN KNAPP, PRESIDENT

NURSING WITHOUT BORDERS

BY MARY DEMPSEY



Dean Johnson took an indirect path to nursing, with detours that involved a degree in economics, a job in the Virgin Islands, a violin, and a near-death experience on a Mediterranean island.

But once she decided to become a nurse, she stayed solidly on the road.

When she steps down as dean of the George Washington University School of Nursing, Dean Johnson, PhD, RN, FAAN, leaves a notable legacy.

She led the launch of a school that, in less than five years, has become a national voice for improved quality of nursing care as well as an institution that advocates for nurses

to take a greater leadership role in the health care arena. Dean Johnson has also put the school at the forefront of an effort to broaden rural and underserved Americans' access to primary care services.

Colleagues and students may find it hard to imagine Dean Johnson involved in anything other than nursing. This career wasn't even on her radar when she enrolled as a freshman at the University of Illinois.

"At the time I was growing up in the 1960s, there was much going on in terms of civil rights and the role of the government in Vietnam," she says. "I was interested in developing countries, and I thought an economics degree would help me change the world."

Following graduation, she worked on a VISTA program to open a preschool in the Virgin Islands for the children of foreign laborers, yet it felt like something was missing. So she spent a year studying at a music conservatory in Chicago, until she decided she "wasn't going make it as a concert-quality violinist."

The turning point came during a serious illness while on a trip to the Greek island of Spetses.

"We were about a six-hour boat ride away from medical care. They tried to get a physician to come to the island, and while I waited I had days to think—about dying in a strange country, about how I loved science, and about how I enjoyed working with people."



“It is difficult to say goodbye to someone who has been the foundation for such an important school and contributed so much to the university as a whole, but Jean’s legacy will live on for many years to come and benefit countless students, faculty, and staff. Her dedication and accomplishments are truly inspirational.”

—STEVEN R. LERMAN, PROVOST

With her recovery came a revelation: she would follow the path of an aunt and a sister and enter nursing. So, Dean Johnson headed back to school for a bachelor’s degree in nursing. That was followed by a master’s degree from one of the first geriatric nurse practitioner (NP) programs in the country at the University of Wisconsin.

“I was very fortunate because there was a primary care physician shortage, so I received a traineeship that paid my tuition and a monthly stipend for the NP program,” she says. “I think about that often in the context of today’s student loan burden.”

In 1979, when her family moved to the District of Columbia, the nurse practitioner movement was not well known in Washington. “But I learned through my research that there was a relatively new NP program at the George Washington University. So I decided that’s where I would start looking for an NP position,” she says.

GW had started a physician assistant program in 1973 and a NP program a year later. The university was also trying to integrate more work in geriatrics—the clinical area that Dean Johnson finds most exciting—into the curriculum for its medical students. Dean Johnson, by then the mother of two small children, joined GW as a geriatric nurse in 1981.

She hadn’t been long on the job when the director of GW’s NP program announced a yearlong sabbatical. Dean Johnson was asked to take over the director’s duties.

“I was a brand new NP and I had never taught a course in my life,” she says. “But it was one of the best things that happened to me. It pushed me in ways that I wouldn’t have thought about going.”

During that year, she not only guided the NP program but was also part of a new geriatrics team. She learned quickly how to balance clinical practice, teaching, and

running the NP program. However, Dean Johnson aspired for more. She dreamed of launching a master’s degree program for nurses.

“In the mid-80s, it was clear that NPs needed master’s degrees in nursing,” Dean Johnson says, “so I connected with George Mason University to talk about collaborating on one.”

The person she spoke with at George Mason was Doreen Harper, now dean of the School of Nursing at the University of Alabama. They arranged to meet.

“I’ll never forget that marathon meeting. We spent so much time talking that I had three parking tickets on my car,” says Dr. Harper. “But we did it. In that one meeting we mapped out a full program—high quality and cost effective.”

Dr. Harper described the woman across the table from her that day as someone with “the ability to see the future and get people to follow that vision to incredible outcomes.”

“She’s always been on the forefront of where nursing is going,” she adds, “and watching her move that agenda is just remarkable.”

The program the two women outlined would operate out of George Mason and enable George Washington University to be

part of a nursing master’s degree program.

GW’s nursing program fell within the health sciences division in the School of Medicine and Health Sciences, where Dean Johnson eventually served as senior associate dean for health sciences. Under her watch, nursing enrollment increased and a doctor of physical therapy degree, clinical research administration, and other programs were added. In addition, online education was introduced.

“She reflected an understanding of nursing and health care in an international concept and she also reflected a vision of what GW needed and what would move that forward,” says Professor of Emergency Medicine Jim Scott, who at the time was dean of the School of Medicine and Health Sciences. “I think people at GW don’t realize the respect and reverence people around the country have for Jean. You can’t go anywhere to talk about policy related to nursing that someone doesn’t mention Jean Johnson.”

Her location in DC naturally brought Dean Johnson into policy discussions. The editor of the first journal for nurse practitioners asked her to write a regular policy column to inform NPs about national issues. She was—and remains—especially





“She has this rare blend of astute awareness of what’s going on around her and a capacity for reasoned judgment, all wrapped in a layer of lovely humility and modesty—a rare commodity in Washington. We got to work on a project together having to do with the way teacher education programs are evaluated, and her experience and knowledge of what goes on in the world of nursing turned out to be a real eye-opener to many people working in teacher education.”

**– MICHAEL FEUER,
DEAN, GW GRADUATE SCHOOL
OF EDUCATION AND HUMAN
DEVELOPMENT**



“Dean Jean Johnson is a visionary who is in constant search for the next initiative. Her collaborative nature generated partnerships that span from local to global institutions. She cherishes the relationships that have been created here in Virginia, for instance the Dabney S. Lancaster Community College Nursing Program in Clifton Forge, to those programs in Ethiopia, South Africa, Haiti and, most recently, Thailand.”

**– ELLEN DAWSON,
DONOR, GW PROFESSOR
EMERITUS, AND FOUNDING
SENIOR ASSOCIATE DEAN FOR
ACADEMIC AFFAIRS**



“Jean has consistently acted on that fact that illness can cause others to be stripped of joy. She has an exceptional dedication and tremendous vision about how the human illness ordeal could be met and its burden relieved with highly skilled and caring health professionals. GW has been so fortunate to have Jean’s leadership all of these years.”

**– EILEEN O’GRADY,
GW ALUMNA, CERTIFIED NURSE
PRACTITIONER, AND WELLNESS COACH**

“I have had the pleasure of working with Jean on several fronts over the last 10 years. Her national presence strengthened the nursing profession. She is a thought leader, realizing early on that the future of health care involved advanced practice nursing. Her leadership extended to quality initiatives, as she launched, with the support of RWJF, the National Alliance for Quality Care. Here at GW, Jean’s legacy is broad and deep. Her position as a nursing leader, along with her influence at the university, enabled her to make the School of Nursing a reality. Her stewardship resulted in the school’s high level of national recognition, even as a young school.”

**– MARY JEAN SCHUMANN,
INTERIM SENIOR ASSOCIATE DEAN FOR
ACADEMIC AFFAIRS**

“I became a nurse practitioner in the early days of the NP movement and before I ever met her, I knew the name Jean Johnson. At that time, she was a master’s prepared nurse practitioner, and what was noteworthy to me was she frequently wrote about nurse practitioners. Her publications helped us all to see opportunities and challenges we were facing in new ways. To this day, Jean still provides us with insight and wisdom about the nurse practitioner profession.”

**– PHYLLIS ARN ZIMMER,
PRESIDENT, NURSE PRACTITIONER
HEALTHCARE FOUNDATION (NPHF)**

interested in policy issues related to NP practice, regulations governing nurse assistant training, payment of NP services, and creation of a national regulatory model for advanced practice registered nurses.

Much of Dean Johnson’s attention has been focused on quality care issues, and she was involved in establishing the Nursing Alliance for Quality Care (NAQC), advocating for nurse-sensitive measures of care, and ensuring this was part of nursing education. She also worked on the Quality and Safety Education for Nurses (QSEN) project, a national initiative supported by the Robert Wood Johnson Foundation and spearheaded by the American Association of Colleges of Nursing (AACN). The goal of QSEN is to develop quality and safety competencies within all undergraduate and graduate nursing programs.

Dean Johnson, then-American Academy of Nursing President Joanne Disch, and Jane Barnsteiner, a professor of pediatric nursing at the University of Pennsylvania, were part of the AACN QSEN team that reached out to undergraduate nursing programs across the country.

“They called us the ‘Three Js’ and we set up faculty institutes where teaching institutions could learn about QSEN,” says Dr. Disch. “We did eight of these institutes in 2010 and 2011 and became close friends.” In the process, Dr. Disch found herself struck by the collegial atmosphere that Dean Johnson sparks among nurses and physicians.

“Colleagues look forward to working with Jean,” says Dr. Disch. “She has a passion for nursing, a foundation in the science, and great communication skills.”

Dean Johnson had the honor of working as a scholar in residence at the Robert Wood Johnson Foundation, where she collaborated with Susan Hassmiller, the foundation’s senior adviser for nursing.

Dr. Hassmiller, in charge of developing the roadmap for the foundation to address critical nursing issues, described Dean Johnson as instrumental in transforming the bedside care provided by nurses in the United States.

“We’re talking about teaching frontline nurses about quality improvement, which has turned out to be a great program about how to build leadership capacity,” Dr. Hassmiller says.

She adds that in advocating for changes in the field of nursing, Dean Johnson “understands politics but doesn’t



let politics or people dictate what might be the best solutions.”

In the quest for “best solutions,” Dean Johnson helped GW establish a department of nursing education with its own nursing degrees in 2005, a doctorate program in 2007, and, in 2009, a Bachelor of Science in Nursing (BSN). But a bigger goal lay ahead: a full-fledged School of Nursing.

Dean Johnson knew there was a demand—locally, regionally, and nationally—for nursing education. She also recognized that it would be difficult to attract nursing faculty, expand enrollment, obtain grant funding, and procure philanthropic gifts without a school.

“Jean is a strategic thinker and planner. She envisioned a school of nursing and brought it to life,” says Associate Professor of Medicine Elizabeth Cobbs, who joined the GW faculty in 1984 and worked with Dean Johnson throughout the years. “She and her colleagues built a School of Nursing that matches the excellence exhibited by the Milken Institute School of

Public Health and the School of Medicine and Health Sciences.”

Philip Wirtz, vice dean of programs and education at the GW School of Business, served on Dean Johnson’s dissertation committee, worked with her on the committee that brought the new School of Nursing bylaws into conformity with the faculty code, and, most recently, collaborated with her on a nursing school doctoral degree emphasizing executive leadership and jointly taught with the School of Business.

“Jean has the remarkable ability to create an inspired vision, to bring exactly the right people to the table to implement it, and then to inspire those people to get the job done,” he says. “At the same time, she does not put up with nonsense from anyone, regardless of rank.”

Dean Johnson calls the School of Nursing the crowning of her career.

“There are not many people who get the opportunity to start a school and be its founding dean,” she notes. When she passes the torch, it will be for a school that

she predicts will be ranked in the top 25 in the nation within the next five years, cultivate a robust research agenda linked to policy issues, and see its influence grow—nationally, internationally, and within the university.

Although she is stepping down as dean, Dean Johnson will remain connected to the school, including as a professor, after a sabbatical to travel with her family to Australia and New Zealand and to work on a project to improve the nursing program at the University of Cape Town, South Africa. She’s allocating plenty of time to spend with her five grandchildren, who range in age from 9 to 3.

She also plans to enroll in an executive coaching program at the Hudson Institute of Coaching in California because “you never know what’s next.”

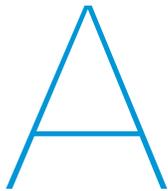
“I’ve never had a career plan. I just pursued opportunities as they arose and were important to me,” Dean Johnson says. “In many ways I guess I’ve just seen my job as helping people do what they do best.” [gw](http://www.gwu.edu)



ADVANCING HEALTH GLOBALLY

“International exchanges and medical missions provide important experiential learning opportunities—and understanding of different cultures and value—that are key to being citizens of the world.”

— FOUNDED DEAN JEAN JOHNSON



mission of GW's School of Nursing (SON) is to improve the health and well-being of people and communities worldwide. This international outlook is rooted in both the

school's and university's strategic plans and reflected in a growing array of overseas programs for nursing students.

Students, faculty, and staff volunteer in schools and community health clinics in Haiti and Ecuador several times a year. SON's international efforts have quickly and strategically broadened beyond the Western Hemisphere as well, as SON builds relationships with nursing schools in Thailand and Singapore. In addition, faculty members are conducting research and delivering papers in South Africa, Australia, and beyond.

“GW sees itself very much expanding partnerships with institutions around the globe, and so does the School of Nursing,” says Dean Jean Johnson. “It is one of our

responsibilities, to the world and to our students. We bring back so much in learning and understanding of global issues.”

Joyce Pulcini, director of community and global initiatives for the School of Nursing, was recruited by SON to develop and grow the school's international programs. She first traveled overseas as a nurse practitioner to St. Vincent and the Grenadines in 1979. She went to the interior of this island nation, in the Lower Antilles, to work with local nurses and develop a curriculum for a new nursing school.

The experience sparked a lifelong passion for teaching nurses, especially those in places with access to few resources. More than three decades later, Dr. Pulcini regularly travels to Haiti and Ecuador with nursing students to volunteer in community clinics and enhance the students' understanding of their roles as global citizens.

“Students today are global and interested in experiencing the world,” says Dr. Pulcini. “They do not see themselves confined to the United States. After working in another culture, students see health care

differently. If nurses are caring for Hispanic or Haitian patients here in the United States, they have a better view into what their patients' lives may have been like and thus more appreciation for their patients' backgrounds.”

Moreover, students return with a better awareness of health care systems in developing countries. Nursing students are introduced to “the disease burden that we don't see in the United States,” Dean Johnson says. “Malaria is a disease few American nurses see in their career, but it is a major disease in many countries. It is this type of experiential learning—and understanding of different cultures and values—that is key to being citizens of the world. Basically, people are so similar in every culture and country. Everybody wants to be healthy. They want their children to survive past the age of five and do well. What people in other countries struggle with every day are broader issues of economics, development, and education.” [GW](#)



ELEVATING HEALTH CARE IN ECUADOR

Lauren Myers-Bromwell, BSN '13, and Andrea Thoennes, BSN '14, didn't hesitate when they found out they were among the eight nursing students accepted to go to Ecuador for a week last summer to help in community clinics. Both had been in the Peace Corps for two years before pursuing their accelerated Bachelor of Science in Nursing (BSN) degree at GW. Ms. Myers-Bromwell served in Uganda and Ms. Thoennes in Guatemala. Both picture themselves eventually working as nurses overseas.

"I was ecstatic when I heard I was accepted for this trip," says Ms. Myers-Bromwell, who stayed in Ecuador an additional week to tour the country.

Upon arriving in Ecuador, the students toured Quito, visiting museums and learning

the history of the country. "It's important to know about the culture before you practice health care there," Ms. Myers-Bromwell says.

The other students on SON's first-ever trip to Ecuador last summer included Sara Mac, MSN '14, Ariel Freeman, MSN '14, Allison Sickerott, BSN '13, Eric Williams, BSN '14, Stephan Mehallow, BSN '14, and Kellan Clausen, BSN '14.

Statistics show that Ecuador has made strides in both health care and education. The literacy rate is about 92 percent. The life expectancy is about 76 years old, compared to the world average of 81. The infant mortality rate is 18 out of 1,000. Yet, according to the World Bank, there are only two nurses and midwives for every 1,000 patients and 1.6 hospital beds for every 1,000.

While in the country, the nursing students experienced an urban setting, a small town, and a rural village. Since much of community nursing involves

educating patients, the group spent time at a school in Quito, where children sleep six, sometimes eight, to a mattress at naptime. Ms. Thoennes, who speaks Spanish, helped translate for the group. "I saw this as an opportunity to do more community work, which I am passionate about," she says.

The nursing students presented posters in Spanish and tutorials in basic hygiene, nutrition, and sexually transmitted infections. They took the children's vital signs and suggested follow up care. Another day, they shadowed nurses in a community health clinic in the town of Tumbaco, outside of Quito, giving immunizations and performing gynecological exams.

What surprised Ms. Myers-Bromwell was the lax approach to basic hygiene in clinics. In the United States, "we have protocols—wash your hands and wear gloves," she says. "In Ecuador, there are not many good hygiene protocols in place yet."





SON students immerse themselves in the culture of an indigenous village near Ibarra, Ecuador.



Accelerated BSN students on the July 2014 medical mission trip with Ecuadorian colleagues.

In San Clemente, a small indigenous village, residents dress as their ancestors did and plow their fields with horses. SON students helped plow and grind corn. They walked into the mountains to find special herbs used in treating patients in traditional medicine. A local midwife showed the nursing students how she delivers babies. Students spent the night with residents in their homes and had a glimpse of what daily family life is like in the village.

"My favorite story was about how the villagers deal with mental illness," says Dr. Pulcini, who organized and led this first trip to Ecuador. "When someone is depressed, he or she walks down to the waterfall with special herbs and gets under the water. Then the person walks away. Couples having problems might do that as well. They also believe guinea pigs are healing and have special powers. They hold the guinea pig over the person's body to find out what is wrong with the person."

For nurses in Ecuador, the GW nursing students left behind something not necessarily related to health care. "Besides filling in medical records, examining patients, giving shots and vaccines, and sharing and discussing diagnoses, the GW nursing students taught Ecuadorean nurses to be proud to have chosen this career," says Amanda de Grunauer, a professor at the Pontifical Catholic University of Ecuador. She worked with Dr. Pulcini to set up the exchange.

"In Ecuador, nurses feel discriminated against and, in some instances, even mistreated," she says. "Their salaries are low. The presence of GW nursing students encouraged them to continue searching for respect and approval of their vocation."

In July 2014, a second trip to Ecuador was led by Associate Professor Stephanie Wright. Joining her were five accelerated BSN students: Chelsea Roher-Dann, Amanda Gallugi, Miriam Howa, Andrew

Hyder, and Kate Pickett. Like the previous mission trip, this was another exceptional student learning experience and important community health care mission. [GW](#)



HELPING HAITIANS LEAD HEALTHIER LIVES

Haiti has desperate needs that keep drawing School of Nursing faculty members and students. This island country is the poorest in the Western Hemisphere, with a population of 9.8 million. The health care system performs poorly. One in every 10 children dies before reaching the age of five. According to a report from the Library of Congress Federal Research Division, "There are 25 physicians and 11 nurses per 100,000 population. Only one-fourth of births are attended by a skilled health professional. Most rural areas have no access to health care, making residents susceptible to otherwise treatable diseases."

GW has been sending medical teams to the central plateau region of Thomonde for weeklong stays for more than a decade. SON joined the effort in 2012, working alongside medical students and doctors. GW partners with Project Medishare, which has a mandate to train health care workers and care for patients in mobile clinics in rural regions.

In January, a team of SON nursing students, faculty members, and staff completed the school's first independent mission trip to Haiti. The multipurpose trip offered SON students a unique learning experience, with the team providing care to patients in a women's health center, mobile clinics, and patients' homes. Health education presentations were given to both patients and Haitian health care providers. Also, the SON team explored how GW nurses could best address the nation's overwhelming health care needs.

The group included eight SON students:

Ashley Strasheim, BSN '14, Olivia Bordiuk, BSN '14, Michelle McEvoy, BSN '14, Rachel Sajous, BSN '14, Nicole McCrory, BSN '14, Laura Kokosky, BSN '14, Ronni Griffin, BSN '14, and family nurse practitioner MSN student Jennifer Beury.

"The nursing mission trip in January built on top of past trips," says Karen Dawn, a SON instructor whose specialty is public health clinic nursing. "It does little good to zoom in for a week then leave and come back a year later. It's a Band-Aid. We have to develop strategies in collaboration with the local community. We conducted a community assessment to help us identify what resources they have, better understand the infrastructure of the region, learn how people get around, and identify the priorities of the community and the government."

Haiti is a country of competing—and daunting—realities. "Port-au-Prince is very crowded, with no driving rules," says Dr. Dawn. "The public transportation is small buses which hold 10 people, but are actually filled to the brim with people hanging on the sides." "In the countryside, the public transportation disappears. "People drive mopeds," Dr. Dawn says. "Everyone has cell phones. You call and the moped comes to take you places. If you are going to the market, your chickens and pigs are strapped on the back of the moped."

Clinic and health care providers are scarce and often hard to get to, as they are scattered far apart. The Thomonde region is about 60 miles from the capital, Port-au-Prince, but the journey takes a few hours over mountainous roads. The SON mission team drove in SUVs to a house maintained by Project Medishare and spent its nights there for the duration of the weeklong trip.

One member of the team, SON Executive Coordinator Tamara Helvetius, has

CONTINUED ON PAGE 18

Partnership for Sustainable Economic Development and Health Care in Haiti

The GW School of Nursing has embarked on a unique partnership to improve the health of those living in the northern part of Haiti near Cap-Haïtien. After the earthquake in Port-au-Prince, the US Department of State, US Agency for International Development (USAID), and Haitian government developed strategies to rejuvenate the Haitian economy. One solution was to develop a textile industrial park, thus creating jobs for upwards of 50,000 Haitians.

The anchor of this effort is Sae-A Trading Co., Ltd., a South Korean-based global company that operates a network of garment factories across the world. It employs more than 50,000 people, many of whom make the T-shirts sold in US stores and worn every day. In addition to the Caracol Industrial Park in Haiti, Sae-A has operated

a school of kindergarten to ninth grade with free education for more than 200 Haitian students, many of whom have parents working in the park. The school will have more than 250 students for the coming year and will extend its classes up to 12th grade.

Woong-Ki Kim, the founder and chairman of Sae-A, is the father of Saila Kim, a GW School of Business 2014 graduate. Chairman Kim met with President Steven Knapp and Dean Jean Johnson, and as a result of their mutual commitment to education and Haiti, the School of Nursing was called upon to explore a medical partnership with Sae-A.

After the park and school were established, the next step was to provide health care for employees and their families. To support this endeavor, USAID built 750 housing units with clean running water and electricity (remarkable since only 12 percent of Haitians have access to consistent electricity), and the US State Department has worked to address international trade barriers that would limit the success of the venture.

Dean Johnson, Director of Community and Global Initiatives Joyce Pulcini, and Associate Director of Development Erin

Harkins-Medina visited Haiti in March to attend the ribbon cutting for the new Sae-A primary school and to see the state-of-the-art factories that have been built.

The SON returned in August as a partner in a medical mission with Sae-A Trading Co., Ltd., Pusan National University Yangsan Hospital in South Korea, and Caracol Industrial Park in Cap-Haïtien. For this August mission, the SON team comprised 12 people, including faculty and staff members, students, and alumni. The GW nursing team worked with physicians, pharmacists, a social worker and a nurse from Pusan University Hospital to care for about 3,000 Haitians in the span of six days.

Sae-A made a generous gift of \$30,000 to support SON faculty and student travel and training costs. Sae-A also covered the costs of in-country transportation, lodging, and meals during the project.

The School of Nursing is committed to being part of a sustainable effort to improve the health of Haitian people and communities. It is anticipated this unique partnership will be a long-term collaboration integrating health care into economic development efforts for the people of Haiti.



Dr. Joyce Pulcini and Dean Jean Johnson with the S&H School nurse at the ribbon-cutting ceremony.

a master's degree in public health. She was born in Haiti and left when she was 13 years old. Ms. Helvetius traveled with the SON team to help set up and operationalize the team's mobile clinics and to help translate. She described what has and hasn't changed in Haiti since she moved away in 1995.

"Many years ago, it was impossible to communicate to others in this remote community," she says. "Today, you can communicate with others in the same town or around the world on a regular basis via cellphone. What has not progressed much is the health care system. Because everything in Haiti is centralized, the health care system is not accessible to most communities."

The team drove to small villages to check on patients, door-to-door. "We knocked on doors and said, 'Hi ya, how you doing? Have any health needs?'" says Rachel Sajous, a student in the accelerated BSN program. She's also Haitian American and speaks Creole. "It really helps us to see people in context of how they are living. Many babies are born at home and not examined by a nurse or doctor."

They stopped at one house, where a woman had a large infection on her leg. Her sore ruptured during their visit. "She was in severe pain," Ms. Sajous says. "Every little movement you could tell hurt so much. We realized we had to get her to the hospital before the infection started to spread."

In a split second decision, the team transported the woman to one of the few hospitals in the country for antibiotics. "If we hadn't been there, she wouldn't have survived," Dr. Dawn says. "It was just fortunate we were there. This happens daily all over the country. Structured health care is limited."

The trip was rugged. At each bump on the unpaved road, the woman winced in agony. "She was in so much pain, she was screaming," Ms. Sajous says. "It was so hard. We were comforting her, but there was nothing else we could do but get through the hard drive."

Ms. Sajous saw the woman a few days later in the hospital. "She was smiling," she recalls. "I just don't know the words to describe what happened. She just needed antibiotics. That's not expensive, but her family couldn't afford them."

That day has stayed with Ms. Sajous. As a Haitian American, she straddles two worlds, she says. She grew up in Boston, but has spent time in Haiti. She was there right after the earthquake in 2010, which devastated



Rachel Sajous, BSN '14, provides care to a father and his children in Haiti.



SON team in Haiti.



SON students and staff with Haitian school children.

the country. "I went with a team doing group therapy for post-traumatic stress," says Ms. Sajous, who has a bachelor's degree in psychology. "There are significant mental health needs after such a tragedy."

She knows a degree in nursing will give her another way in which to help people in Haiti. "I love this country," she says. "I love the culture. It's nice to be able to talk with people. I see my family in them culturally. I feel I have some of the tools to make a difference."

The SON team worked in mobile clinics, seeing 100 to 200 patients a day. Before dawn one day, Haitians were lined up for treatment. "People walked so far and waited all day," says Laura Kokosky, a student in the accelerated BSN program. "People walked in the dark. They waited all day and didn't eat or drink."

The nurses measured height and weight and checked blood pressure. They treated many children with parasites and noted many adults with high blood pressure and hypertension. One reason could be "their salt intake," Dr. Dawn says. "It is very high.

We asked if they used bouillons in their cooking, which is used in flavoring food and has a lot of salt." (See sidebar, page 21.)

At the end of the day, eventually patients had to be turned away. "That was extremely hard," Ms. Kokosky says. "Seeing the demand and not being able to meet it."

The SON team also saw patients at a rural birth center. It was set up with rooms for examinations and another for counseling patients about nutrition and birth control. The back room had three beds for women in labor.

"Dr. Pulcini asked me to come to Haiti because one of the greatest needs is maternal and infant care," says Mayri Sagady Leslie, a certified nurse-midwife and director of the SON nurse-midwifery concentration. "Seventy percent of mothers in Haiti give birth to children at home with little or no medical care. If there are complications, it is often at least a two to three hour drive to get to a hospital."

GW nursing students helped with prenatal exams, supported a woman in labor, and presented posters they prepared

in Creole about birth control and oral hydration in pregnancy. "Some of the stories were really hard to hear," Ms. Kokosky says. "One woman had been abused, had gotten pregnant, and was seen by society as unacceptable. She didn't have any support system and was homeless. She delivered a baby that day."

The nursing students also spent time in local schools, teaching children about brushing their teeth, washing their hands, and basic routines. "That was so much fun, watching the kids get so excited about brushing their teeth and washing their hands," Ms. Kokosky says.

The team's evenings were devoted to talking with the Haitian medical workers staying at the house maintained by Project Medishare. Having two members of the

School of Nursing team who could speak Creole made that possible. "We were really interactive with them," says Dr. Pulcini. "We could assess their needs."

With each trip to Haiti, the nursing school further evaluates how to best fit with the other health care groups working in the country. Beyond setting up clinics and giving out medications for a week and then leaving for a year, "we want to create more sustainable projects," Dr. Pulcini says. "To this end, we worked on education projects for the clinics in the communities and for the community health workers. These critical facilities and caregivers are on the frontline of health care every day in the very rural areas. Education is really the most important thing we have to offer these communities and health care providers."



Accelerated BSN student Jennifer Lambertson and a Haitian child sharing a happy moment.

A Day in the Life of a Midwife in Rural Haiti

Mayri Sagady Leslie, a certified nurse-midwife and director of the SON nurse-midwifery concentration, joined the January mission to Haiti because maternal and infant care is a major priority in Haiti and the need is substantial.

Women in Haiti give birth to three children on average, starting at the average age of 22. The maternal mortality rate is 350 women out of 100,000 dying in childbirth (compared to 21 per 100,000 women in the US). The infant mortality rate in Haiti is 51 babies out of 1,000 (compared to six in the US) and skilled health providers attend to only 37 percent of births, according to the World Bank and United Nations interagency group.

Local, community "matronas" are there to help but may not have sufficient supplies, equipment, or training. "While homebirth can be safe in the right circumstance, there isn't the infrastructure to deal with a mother and newborn if something goes wrong," says Dr. Leslie.

A key purpose of this trip was for SON faculty to provide support and training to the midwives there. The

educational opportunities, resources, and professional support available to the midwives in rural Haiti are minimal.

One example of an area for improvement in maternal and fetal care in rural Haiti is the frequent lack of a clear due date on the mother's chart. Due dates are based on a woman's last menstrual cycle.

"The time at which a mother becomes pregnant is an important piece of information," Dr. Leslie says. It helps health care professionals know "if the baby is not growing normally or is too small, has poor nutrition, or is sick." For example, she continues, "In the clinic, I saw a woman who measured 30 weeks, but according to the due date in the chart, based on an unclear last menstrual period, she should have been 36 weeks. If the chart was accurate, she was weeks behind and this is significant."

In the United States, an ultrasound determines how far along a pregnancy is. In Haiti, this kind of technology costs too much and is not accessible to most women in rural communities.

This combined with mothers not remembering their last menstrual periods clearly make establishing due

dates difficult for midwives.

An early physical exam is an important measure, Dr. Leslie says. "This is a standard procedure here in the US and in many countries. It involves manually feeling the size of the uterus at the first visit and estimating the number of weeks of the pregnancy."

In Haiti, there often is no record of such an exam on the charts. Dr. Leslie asked a Haitian midwife if she was doing such physical exams. The midwife answered: "I could use some help with that," indicating the need for training and support which was provided.

Most Haitian hospitals, when they are available, are not set up well for mothers delivering babies, Dr. Leslie says. "Some nights in the hospital, the cleaning people are catching babies. Standards are low. Rooms are big wards, with 30 people. There's no privacy. There aren't basic things. They have all this equipment that's been donated, but much of it does not work. You often can't plug in a baby warmer, a fetal monitor, or a blood pressure machine."

Dr. Leslie believes what SON can do best is educate community health care providers and coordinate with the country's health care system. "Our purpose is always education," she says. "This is a good opportunity for students to make a sustainable difference, not just in the field clinic and women's clinic rotations, but by educating patients and health workers."



Dr. Mayri Sagady Leslie with a Haitian mother and her child.



GW School of Nursing and Pusan National University colleagues on the Sae-A sponsored medical mission in Caracol, Haiti.



Dr. Joyce Pulcini registers a Haitian father and his children.



Accelerated BSN Director Malinda Whitlow triages a Haitian patient.

Most recently, in August, another SON delegation provided care to about 3,000 patients in Haiti through a unique partnership with Sae-A, a South Korean-based global apparel manufacturer and exporter that also runs Caracol Industrial Park, and Pusan National University in South Korea. This SON trip to Haiti was made possible by the generous support of Sae-A. (Read more about Sae-A and this partnership on page 17).

The SON team worked with a team of physicians, pharmacists, and a social worker from Pusan National University in South Korea to see patients on site at Sae-A's Caracol Industrial Park.

Participating on this trip from SON were Dean Johnson, Dr. Joyce Pulcini, Associate

Director of International Nursing Programs Carol Lang, Accelerated BSN Director Malinda Whitlow, Clinical Instructor Rebecca Mance, and Adjunct Professor Corrine Howdyshell. Also participating were family nurse practitioner student Danielle Brow, nurse-midwifery student Danielle Melican, and accelerated BSN students Jennifer Lambertson, Rachel Sojous, and Taylor Wilson Hill.

"This was a wonderful multicultural experience—American nurses and students working with South Korean physicians, pharmacists, and a social worker to care for Haitian patients," says Dean Johnson. "And, it was a remarkable experience to work with our South Korean partners—the medical team from Pusan University who are highly

skilled in doing medical missions, and our Sae-A colleagues who made the care of 3,000 Haitians possible. I have the greatest respect for the generosity of Mr. Kim, Chairman of Sae-A," says Dean Johnson.

The two health care teams merged into one to care for about 500 patients a day over the course of six days, despite language barriers and differences in the roles of health care professionals in the United States and South Korea.

"One of the biggest differences was that there are no nurse practitioners (NPs) in South Korea, so initially the South Korean physicians were unsure of this role as NPs work independently, diagnose and prescribe," says Dr. Lang. "But after the first day and seeing level of competency of our

NPs, the physicians were in awe and very much appreciated the NPs' ability to work independently."

The SON team spoke with patients and physicians through translators. During the mission, three languages were consistently involved: English, Korean, and multiple dialects of Creole. At times, a fourth language was involved: English, Korean, Creole and Spanish, as some people who were from the Dominican Republic (which borders Haiti) and living in the Caracol area were also treated.

"The highlight was when we realized that by the end of the week our two teams became one. We ended the week with great mutual respect and understanding only possible with the generous spirit of those involved," says Dr. Pulcini.

The team saw a high prevalence of hypertension in fairly young (under 40), non-obese patients, which is unusual. Many patients with also had malnutrition, eye disorders (glaucoma, cataracts), generalized pain, and a history of chikungunya (which is a mosquito-borne disease).

All patients had their vital signs checked in triage, where SON students worked with Dr. Lang and Dean Johnson. The triage team then sent patients to an appropriate specialty station at reception: general surgery, OG-GYN, family medicine, pain clinic.

"There was a gratitude you would see from people that doesn't happen here, and I'm probably guilty of that when I go to the doctor, too. If you have insurance here, health care is just a right and we treat it as such. There, little old ladies came up and gave us hugs and kisses. Those were the moments I realized I was doing a good thing," says Ms. Wilson-Hill.

In an effort to make a lasting impact, SON medical missions to Haiti include an educational component. All patients went through education stations, which included nursing student-created videos in Creole that addressed a range of topics, including: hypertension, hand sanitation, rehydration, cholera, STIs, and pregnancy complications. Also, every adult man and woman received education about gender violence.

SON is committed to maintaining a presence in Haiti, as part of efforts to improve the health of Haitian people and communities. These medical missions also provide invaluable service learning experiences for our students. [GW](#)

Dr. Karen Dawn examines a Haitian woman for hypertension.



Hypertension in Haiti

Karen Dawn, a SON instructor and public health nurse specialist, was puzzled by the high rate of hypertension among Haitian patients. Haitians are not overweight or sedentary. "They get enough exercise because they walk everywhere. Few smoke tobacco. All triggers for high blood pressure," she says. So what is causing the high rate of hypertension among so many patients she saw on several trips?

She had a hunch it was connected to the Haitian diet and, with the help of student nurses, pieced together the puzzle. Before the trip, Dr. Dawn scanned the medical literature about hypertension in Haiti and found that indeed the rate was high. Next, then-students David Hamid, BSN '14, William Smith, BSN '14, Scotti Petersen, BSN '14, and Brie Ware-Colantuoni, BSN '14, applied for a grant with the Sigma Theta Tau International Honor Society of Nursing to buy equipment such as scales and height

measurement tools to help collect data while they were in Haiti.

The nursing school received approval to test blood pressure and ask diet-related questions to see if there is a connection between diet and high blood pressure in this population. The collected data is currently being analyzed and will be published in the future.

As the SON team examined patients, the team asked the patients questions about what they ate and how they prepared their meals. "They have a high salt intake," says Director of Community and Global Initiatives Joyce Pulcini. "Rural Haitians add five or six bouillons to meals when they are being prepared. Since Haitians often don't have electricity, salt is used to cure the meat. There might be another dietary source connected to the hypertension or it could be due to a genetic predisposition."

"Hypertension is a silent disease," Dr. Pulcini says. Uncontrolled it can lead to heart attacks, strokes, aneurysms, and heart failure. The disease can be managed with medications and changes in diet and lifestyle.

Faculty Presentations at International Conferences

SON faculty members presented at prestigious conferences around the globe. Here is a sampling of recent SON international presentations:

International Nurse Practitioner/ Advanced Practice Nursing Network Conference Helsinki, Finland (August 2014)

"A Nursing Approach to Improving University-Based, Interdisciplinary, Short-Term Medical Mission (STMM) Team Preparation"

Abstract poster presentation by Drs. Erin Athey, Joyce Pulcini, Carol Lang, and Inova colleague Shawna Brennfleck, MSN '13

"International Consulting: Setting Yourself Up for Success"

Abstract presentation by Drs. Christine Pintz and Joyce Pulcini

International Nurse Education Conference Noordwijkerhout, Netherlands (June 2014)

"Evaluation Findings of the Graduate School Bootcamp"

Research authored by Drs. Christine Pintz and Laurie Posey, presentation by Dr. Christine Pintz

"Transitioning a Bachelor of Science in Nursing Program to Blended Learning: Successes, Challenges & Outcomes"

Research authored by Drs. Laurie Posey and Christine Pintz; presentation by Dr. Laurie Posey

Lilly International Spring Conference on College and University Teaching and Learning Bethesda, MD (May 2014)

"Building a Collaborative Learning Inter-Professional Experience for Graduate Students"

Presented by Dr. Nancy Falk and Mr. Ken Garrison, School of Medicine and Health Sciences adjunct faculty member

"Does Prior Clinical Experience Predict Success in Graduate Nursing Programs?"

Presentation by Dr. Erin Athey

"Early Identification of Online Students with Language and Writing Challenges"

Presentation by Drs. Linda Briggs and Mayri Sagady Leslie

Royal College of Nursing Research Conference Glasgow, Scotland (April 2014)

The following five presentations represent the aggregate research of 12 scholars from five countries—Australia, Canada, South Africa, the United Kingdom, and the United States.

"Pioneering Social Capital Research to Support Distance Learning Programs"

Abstract presentation by Drs. Brenda Sheingold, Joyce Hahn, Deborah Chapa, Billinda Tebbenhoff, and two international colleagues

"Social Capital Research in Distance Learning Nursing Education: Methodological Issues"

Abstract presentation by Drs. Brenda Sheingold and Joyce Hahn, and two international colleagues

"Art Therapy Approaches to Enhance Social Capital Research in New Nursing Practice Student Cohorts"

Abstract presentation by Drs. Brenda Sheingold, Deborah Chapa, and Carol Lang, and GW Assistant Professor of Art Therapy Dana Betts

"Social Capital as a Means to Foster Non-formal Academic Leadership"

Abstract presentation by Dr. Brenda Sheingold and international colleagues

"Social Capital to Build Global Research Networks to Renew Nursing"

Abstract presentation by Drs. Brenda Sheingold and Joyce Hahn, and four international colleagues



Nursing scholars from around the globe, including a large contingent from GW SON, presented their research at the Royal College of Nursing Research Conference in Glasgow, Scotland in April. Pictured at the conference (from left to right) are: Dr. Anne Hoffmeyer, University of South Australia senior lecturer in nursing; Dr. Brenda Sheingold, GW assistant professor of nursing; Dr. Donna Betts, GW assistant professor of art therapy; Dr. Joyce Hahn, GW associate professor of nursing; Dr. Deborah Chapa, GW assistant professor of nursing; Dr. Carol Lang, GW assistant professor of nursing, Dr. Ruth Taylor, Anglia Ruskin University deputy dean of nursing, and Dr. Terri Gibson, program director, University of South Australia.

Conference of the European Network in Aging Studies (ENAS) Galway, Ireland (April 2014)

"I May be Old, but I'm Still a Person"

Oral presentation by Dr. Beverly Lunsford, Director, SON Center for Aging, Health and Humanities

"Yoga in the Workplace: Benefits for an Aging Workforce"

Poster presentation by Shari Silwa, SON staff member and program coordinator for Washington Area Geriatric Education Center Consortium

Council on International Educational Exchange (CIEE) Winter Faculty Summit Santiago, Dominican Republic (January 2014)

"Best Practices for Developing Service Learning Programs Using an Interdisciplinary Model for Undergraduate Nursing and Public Health"

Presentation by Dr. Carol Lang

Meeting on Geoscience & Hydrology - Developing Sustainable Networks of Women Scientists for Addressing Issues of Hydrologic Events and Hazards Workshop

Argentina (November 2013)

"Elements of Effective Network Building"

Oral presentation by Dr. Jessica Greene

Sigma Theta Tau International Nursing Research Conference Prague, Czech Republic (July 2013)

"Retaining the Wisdom: Deans' Reflections on Extending the Academic Working Life of Aging Nurse Faculty"

Research presentation by Dr. Nancy Falk



Provost Lerman, SON Leadership, George Mason University Dean Emerita Rita Carty, and Thammasat University Dean of the Faculty Nursing Manyat Ruchiwit celebrate the new GW and Thammasat University agreement.

Expanding International Collaborations

As SON's ties with Haiti and Ecuador grow even closer, the nursing school is hard at work developing and expanding relationships with other nations around the globe—from Thailand to Singapore, and Australia to South Africa.

SON is expanding collaboration with Thammasat University, Thailand's second oldest university, which has more than 30,000 students on multiple campuses. In April, GW and Thammasat University signed a letter of understanding to explore collaborative opportunities in nursing and health sciences. As part of the agreement, SON and Thammasat University delegates discussed opportunities for doctoral faculty and student exchanges and other initiatives of mutual interest.

Soon after the agreement was signed, Thammasat University nursing student Ormanee Patarathipakorn spent two weeks at SON. Her interests are in health care quality and she met with SON faculty members to discuss the topic.

Also, in September 2013, Associate Dean for Graduate Studies Christine Pintz spent the month at Thammasat University. During that visit, Dr. Pintz worked with the university on its nursing doctoral degree program. Her primary contributions were in curriculum development.

This September, DNP Director Deborah Chapa was at Thammasat University and worked on palliative care and family

primary health care components of the doctoral program there. Dr. Chapa also lectured on evidence-based practice and clinical decision-making tools such as pre-appraised evidence databases. This lecture was presented to the faculty, students, and nurses from Thammasat University hospital.

"International exchanges are important opportunities for both faculty members and students to gain an understanding of health care around the world and how different cultures respond to illness and take care of people," Dr. Pintz says.

Another case in point is SON's work with the National University of Singapore (NUS) Alice Lee Centre for Nursing Studies—the only university in Singapore to grant graduate degrees in nursing. Dr. Pulcini, SON's director of community and global initiatives, has twice consulted for NUS.

Most recently, Dr. Pulcini looked at the challenges facing advanced practice nurses as health care moves out of hospitals and into communities.

In May, SON hosted four pediatric advanced practice nursing students from NUS. These students—Shi Min Khoo, Mei Yi Lee, Cynthia Rong Xiu Lim, and Yanyin Zeng—were part of the first student cohort with whom Dr. Pulcini worked while consulting at NUS. During their SON visit, the students participated in seminars and performed clinical observerships at pediatric clinical sites affiliated with Children's National Medical Center (CNMC). "CNMC has been so helpful in arranging these observerships," Dr. Pulcini notes.

Also, in October 2013, SON hosted Dr. Sally Chan, formerly the head of NUS

and now the head of the School of Nursing and Midwifery at the University of Newcastle in Australia.

Dr. Chan is a leading global nurse researcher and educator and a 2013 Sigma Theta Tau International Researcher Hall of Fame honoree. During her visit to SON, Dr. Chan presented her research on mental health and experience sharing of childbearing women.

SON has another Australian connection through Associate Dean for Research Jessica Greene, who was awarded a fellowship with the Australia Department of Health and Aging three years ago to evaluate a quality improvement program for general practitioners. She returned this spring for a follow up visit.

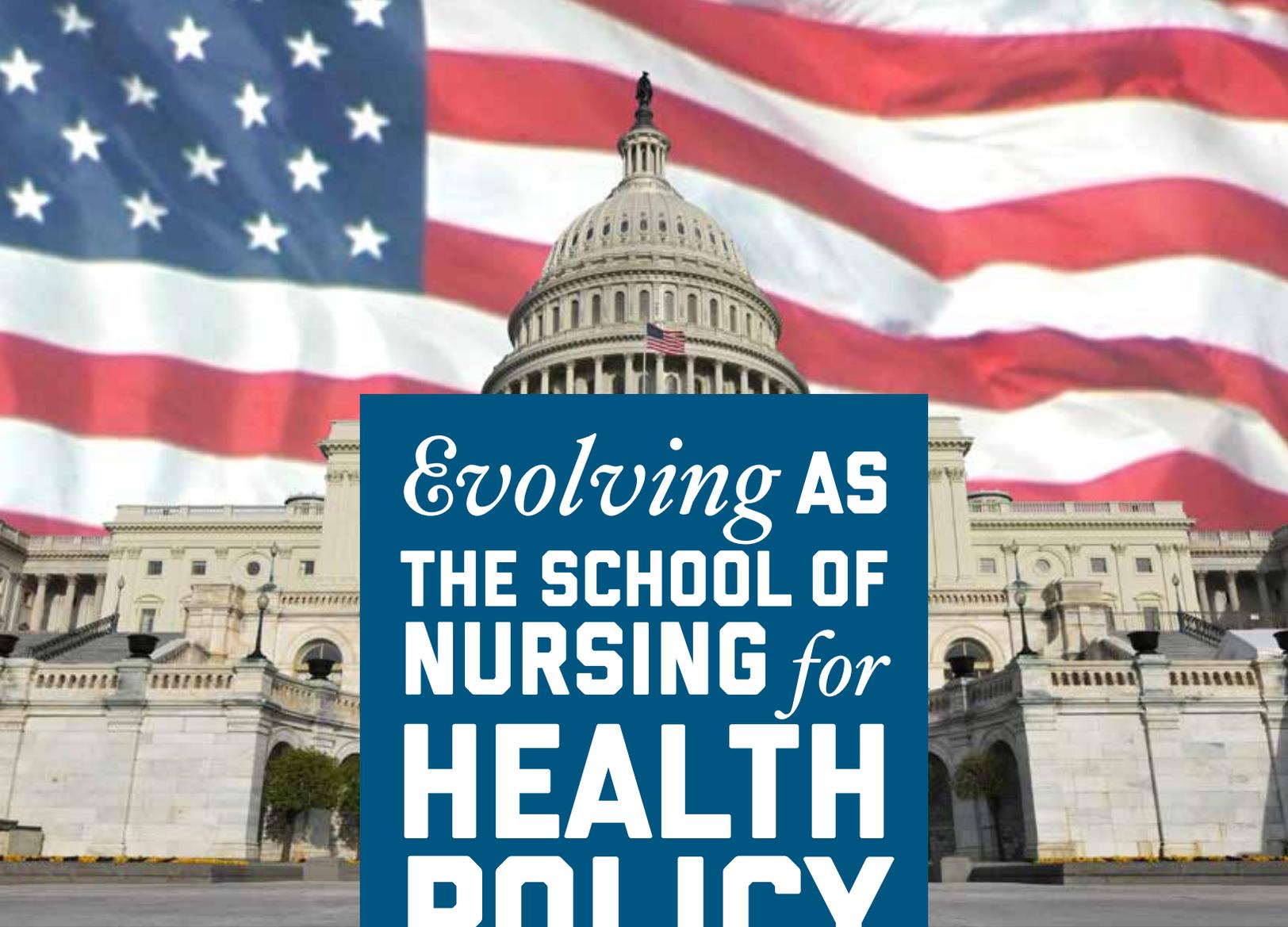
During her April trip, Dr. Greene worked with colleagues at the University of Technology Sydney to study the factors people consider in selecting a general practitioner.

"The timing was perfect because the work I have been doing on how to effectively present quality and cost information to consumers is very relevant to their study," Dr. Greene says. "Also, it was wonderful to work in an interdisciplinary way on issues that relate both to the United States and Australia."

In 2015, while on sabbatical, Dean Jean Johnson will be at the University of Cape Town, South Africa, to research how to improve health services by nurses throughout South Africa. Health statistics, particularly related to maternal and child morbidity and mortality, are very troubling. "Nurses can play a major role not only in acute care, but in the new district health teams that have been established," Dean Johnson says.

South Africa is working to establish a strong primary care network to improve health outcomes. Working with nursing faculty at the University of Cape Town, Dr. Johnson will assess the gaps in care, the availability and content of educational programs, and create a strategic plan to enhance nursing care to improve health outcomes.

"The exchange of ideas and learning experiences between universities and colleagues is valuable," says Dean Jean Johnson. "This is critical to achieving the school's vision of improving health care worldwide."



Evolving AS **THE SCHOOL OF NURSING *for*** **HEALTH POLICY**

GW School of Nursing is evolving as the school of nursing for health policy. We are increasingly being tapped as experts for policy issue panels, committee service, and special projects; we conduct sponsored health policy research and projects; we publish in and serve on editorial boards for top journals; and we are implementing a core health policy curriculum across the BSN-MSN-DNP continuum.

Our strategic location in Washington, DC, provides proximity to government agencies and policymakers, policy professionals, lobbyists, and think tanks.

“The nursing profession has a unique and important perspective on health policy given nurses’ extensive frontline and firsthand experiences regarding the effects of health care regulations and laws in providing quality care,” says Dean Jean Johnson.

According to a Robert Wood Johnson Foundation (RWJF)/Gallup survey of opinion leaders from corporate, government services, industry, and insurance sectors, the majority of those surveyed said nurses should have more influence than they do now in health policy.

Health policy areas specifically identified by survey respondents as important for nursing involvement were: reducing medical errors and improving patient

safety, improving quality of care, expanding preventative care and promoting wellness, improving health care efficiency and reducing costs, and coordinating care across the health care system.

Also, nurses have consistently been identified as the most trusted profession in annual surveys conducted by Gallup Poll, which suggests that policy and governance ideas put forward by nurses could gain significant traction.

“GW School of Nursing is increasingly being recognized as a voice in health care policy, and the school is nationally known as an advocate for nurses taking a greater role in the health care policy arena,” says Dean Johnson. [gw](#)



PULCINI PRESENTS AT PRESTIGIOUS POLICY CONFERENCE

Joyce Pulcini, PhD, RN, PNP-BC, FAAN, served as a policy expert panelist alongside other influential health care professionals in May during the prestigious Princeton Conference, an annual event held by The Council on Health Care Economics and Policy.

This year's 21st conference explored, "The Changing Health Care Landscape" and brought together health policy experts to discuss and debate economic issues related to health care policy.

Dr. Pulcini served on the panel that examined "The New Medical Workforce" and discussed the effect of the Affordable Care Act (ACA) on expanding and diversifying the workforce and efforts to enhance the profession's capacity for team-oriented models of care.

Renowned health economist Dr. Uwe Reinhardt and Dr. Stephen Shortell, distinguished professor of health policy and management at the University of California-Berkeley, also served on the panel, moderated by Dr. James Madara, CEO and executive vice president of the American Medical Association.

As a panelist, Dr. Pulcini focused on scope of practice laws affecting nurse practitioners (NPs). More than half of the states limit the extent of an NP's practice, which in turn limits the care that can be provided, she said.

"New models of practice are emerging, such as retail clinics and new ways to

configure the health care team so everyone can work to the top of their license," she said. Dr. Reinhardt also noted his support for removing barriers to NP full scope of practice. "If we restrict providers, we're limiting innovation and different ways care could be provided," said Dr. Pulcini. [gw](#)

STUDENT WITNESSES IMPACT ACT BECOME POLICY

One of GW SON's own witnessed history in October when she watched President Barack Obama sign the "Improving Medicare Post-Acute Transformation (IMPACT) Act." Arilma St.Clair, a nurse for 14 years who is now pursuing a post-master's certificate in the family nurse practitioner option, serves as the president for the Washington, DC National Association of

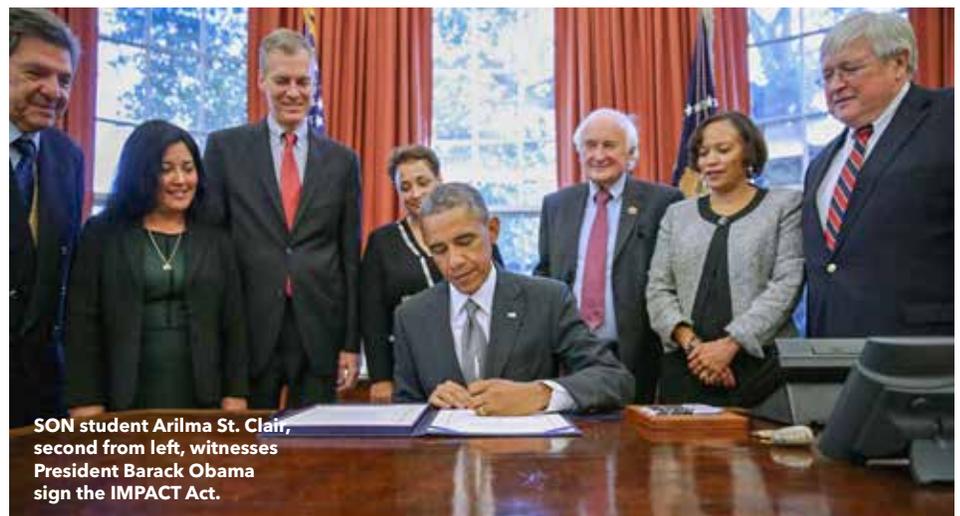
Hispanic Nurses (NAHN) chapter. She stood in for the organization's national president at the signing. "It was a privilege and an honor to witness the signing of the IMPACT Act and what it meant for our most frail of patients," says Ms. St. Clair.

The IMPACT Act affects four different post-acute care service delivery settings: skilled nursing facilities, home health agencies, inpatient rehabilitation facilities and long-term care hospitals, according to NAHN. It calls for standardization and common measures across all four settings and brings \$11 million to fund the development and implementation of a new information system for collection of payroll-based staffing levels, which is expected to be in place by end of 2016 and will provide quality measures.

The law also recognizes the need for closer regulatory attention and enforcement, and allocates funding for mandatory inspections of hospices every three years, according to NAHN.

Ms. St. Clair says the signing was special for her, as an advocate of equitable quality of health care. "In my spare time I coordinate health fairs and screenings to address underserved immigrant communities through the NAHN DC chapter," she says. "I come from a family of nurses. My mother just retired with 40 years in the field, I have aunts, cousins and in-laws who are nurses, and every chance I get I promote the profession, especially among minority women."

Ms. St. Clair works in occupational health and decided to go back to school in order to expand her scope of practice. She decided to focus on GW SON's program after meeting Dean Jean Johnson at a nursing event in May. [gw](#)



SON student Arilma St. Clair, second from left, witnesses President Barack Obama sign the IMPACT Act.

SON Studies Novel Physician Compensation Model

Jessica Greene, PhD, MPH, recently wrapped up a major three-year study, "How a Health System Uses an Innovative Physician Compensation Model to Drive Improvements in Care Delivery."

The nearly \$300,000 project was sponsored by The Commonwealth Fund to study the effectiveness of discarding a fee-for-service model and replacing it with performance-based payment rewarding quality, productivity, patient experience, and cost.

Dr. Greene, who is associate dean for research, published the study findings in *Medical Care Research and Review* in November. As principal investigator, Dr. Greene and her co-authors studied Fairview Health Services, a nonprofit health care system in Minnesota. They interviewed primary care providers working as part of a new team-based system focusing on quality of care, patient experience, and cost effectiveness. Quality and productivity measures contributed to the bulk (40 percent each) of compensation under this model.

The providers reported their own and their colleagues' quality of patient care improved under the new model. A huge majority (92 percent) reported that they reached out to patients struggling with various quality metrics more frequently with their salary dependent on these measures. Many also reported greater collaboration among team members, though the average number of patients seen each day fell.

Unfortunately, more than half of the providers also reported a decline in job satisfaction, despite a reported increase in income. Dr. Greene and her co-authors posited this decline may be due to the lack of control the providers felt about their compensation, the complexity of the model, and changes implemented midstream. [GW](#)

Patient Activation Associated with Health Outcomes and Costs

"Patients with Lower Activation Associated with Higher Costs; Delivery Systems Should Know Their Patients' Scores" was among the top 15 most-read articles of 2013 in *Health Affairs*. The prominent peer-reviewed journal provides a forum for analysis and discussion of health policy matters in domestic and international spheres.

This research article was co-authored by Dr. Jessica Greene. She collaborated on this longitudinal research study and article with Judith Hibbard, professor emerita and senior researcher in the Health Policy Group at the University of Oregon; Valerie Overton, vice president for quality and informatics at Fairview Medical Group in Minneapolis; and Rebecca Sacks, research assistant at GW School of Nursing and a public health graduate student at the Oregon Health Sciences University.

The research study and article examined the relationship between patient activation levels and billed care costs. Patient activation refers to the skills and confidence that enable patients to be actively engaged in their health care. Health care delivery systems are increasingly working to support patient activation to help them and their patients improve outcomes and influence costs.

"I've been interested in the patients' role in health outcomes for some time, in part because it makes intuitive sense that patients' behaviors would have a big impact on their own health, but it hasn't been that well documented," says Dr. Greene.

The research study involved analysis of 33,163 patients of Fairview Health Services, a large health care delivery system in Minnesota. The study found that patients with the lowest activation levels—those least equipped to manage their care—had predicted average costs that were 8 percent higher in the base year and 21 percent higher in the first



half of the next year when compared to the costs of patients with the highest activation levels. These are significant differences. "What's more," according to the article, "patient activation was a significant predictor of cost even after adjustment for a commonly used "risk score" specifically designed to predict "future costs."

Their prior work has found that patient activation is associated with indicators like A1c in diabetics, blood pressure, and costly health care use. "The more involved a patient was, the more preventive care they had and the fewer emergency department visits they made," says Dr. Greene.

In the article, Dr. Greene and her colleagues wrote, "As health care delivery systems move toward assuming greater accountability for costs and outcomes for defined patient populations, knowing patients' ability and willingness to manage their health will be a relevant piece of information integral to health care providers' ability to improve outcomes and lower costs."

Moving forward, the million-dollar question, according to Dr. Greene, is how to get people to be more engaged in their own health care—which has consistently been shown as a key factor in improving health. [GW](#)

Dr. Greene Leads Aligning Forces for Quality Consumer Engagement Evaluation

Aligning Forces for Quality (AF4Q) is the Robert Wood Johnson Foundation (RWJF) signature effort to lift the overall quality of health care in 16 targeted communities, reduce racial and ethnic disparities, and provide models for national reform.

The major initiative began in 2006, and a mixed methods evaluation of the program is underway to assess the impact of AF4Q, to identify key lessons about the program design and implementation, and to expand the knowledge base around health care reform at the local level.

Dr. Jessica Greene was invited to lead the consumer engagement component of AF4Q Evaluation and will be part of the AF4Q Evaluation effort until it ends in April 2015.

The consumer engagement

component of the AF4Q Evaluation examines the impact of the multi-stakeholder Alliances' efforts to increase consumer use of public reports of health care provider quality, improve patient self-management of chronic conditions, and to integrate the consumer voice into the work they are doing.

Dr. Greene says she was excited to lead this component of the evaluation "because the 16 communities had to work on engaging consumers at different levels—both around their own health care and also bringing consumers to the leadership table for the Aligning Forces interventions. The evaluation provides a wonderful laboratory to learn from the alliances' experience in consumer engagement," says Dr. Greene.

"The Robert Wood Johnson Foundation invested in a model of bringing stakeholders together to change the market through public reporting of quality performance, quality improvement, consumer engagement, and payment reform," says Dr. Greene. "We need to know how effective these strategies are in combination, and why

they were effective so that others can replicate effective approaches."

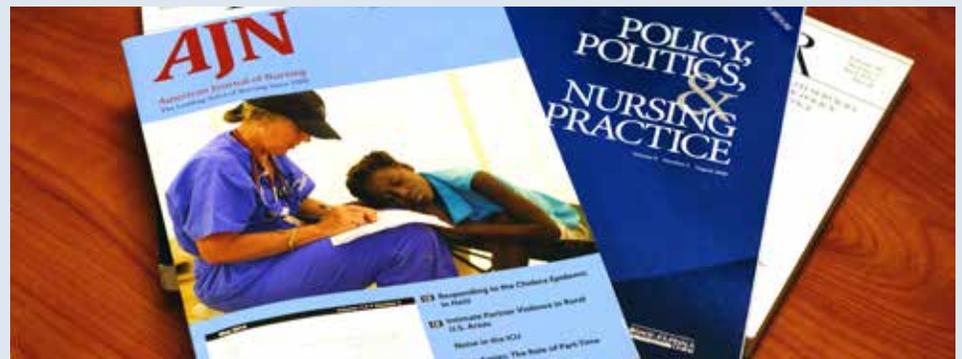
AF4Q invested in 16 geographically, demographically and economically diverse communities—about 37.7 million people, or 12.5 percent of the American population. Cleveland, western Michigan, Maine, and Humboldt County, California, are among the communities involved. AF4Q asks the people who get care, give care, and pay for care to work together toward common, fundamental objectives to lead to better care, according to the RWJF. As AF4Q continues, data on quality, cost, and patient experience are being collected and publicly reported so that the 37.7 million people in the 16 communities involved have access to information on the quality of care available to them locally. [gw](http://forces4quality.org)

FOR MORE INFORMATION please visit forces4quality.org.

Experts on Editorial Boards

Several School of Nursing faculty members offer their expertise to the health care profession as members of editorial boards and contributing editors to notable publications.

Dr. Joyce Pulcini is a contributing editor for policy of the American Journal of Nursing, the oldest nursing journal in the world, and is a senior associate editor for Policy, Politics and Nursing Practice, a quarterly journal focused on data and policy analysis.



Dr. Karen Wyche sits on the editorial boards of Sex Roles: A Journal of Research, an interdisciplinary behavioral science journal, and Affilia: Journal of Women in Social Work, a journal that addresses social work issues from a feminist point of view.

Dr. Jessica Greene is on the editorial board of Medical Care Research and Review, a top health policy and services journals.



DYING IN AMERICA: HOSPICE AND PALLIATIVE CARE

When the Institute of Medicine (IOM) released what promises to be an influential report with far-reaching implications for health care, a GW School of Nursing faculty member's work was twice cited as shaping the institute's findings about palliative care.

"Dying in America: Improving Quality and Honoring Individual Preferences Near the End of Life," built on a significant 1997 IOM report, which also examined how to improve end-of-life care. The new report released in September 2014 re-examined the issue, as the country has seen major changes in its demography, health care outcomes and cost of health care, according to the report's foreword.

Associate Research Professor Dale Lupu, PhD, MPH, has worked in hospice and palliative care for more than 30 years, advocating for policy changes in that realm for the last 15 years.

In addressing a physician workforce shortage, the IOM cited an article Dr. Lupu wrote with a committee from the American Academy of Hospice and Palliative Medicine (AAHPM) in 2010 examining workforce issues related to end-of-life care. Dr. Lupu and her team estimated the physician shortage in the specialty of hospice and palliative medicine to be between 3,000 and 8,000 full-time equivalent physicians.

"It's scary when you say you need 8,000 physicians and are only training 200 a year in fellowships nationwide," says Dr. Lupu. "One of the major points in the IOM report is that we need to expand the basic palliative skill level of all health professionals, and not just rely on the palliative specialists to handle it all."

The IOM cites a major area of progress since its 1977 report: the official recognition of the field of hospice and

palliative medicine (HPM) by the American Board of Medical Specialties (ABMS) and the Accreditation Council of Graduate Medical Education (ACGME) in 2006. Dr. Lupu, formerly the CEO of the American Board of Hospice and Palliative Medicine, spearheaded the successful effort to achieve formal status for the subspecialty.

"In the house of medicine, being a formal subspecialty gets you a seat at a lot of important tables. Even though there were lots of people prior to 2006 who knew how much hospice and palliative care could contribute to improving patient and family experience, their voices weren't being heard in the right places. Now that it is a recognized field, we hope what we know about relieving suffering and delivering person-centered care will have a wider impact," Dr. Lupu says.

Ed Salsberg, MPH, a new member of the SON faculty (see page 29) served as a consultant for the American Academy of Hospice and Palliative Medicine (AAHPM) committee that assisted in authoring the workforce article. Mr. Salsberg specializes in nursing workforce issues and served as founding director for the National Center for Health Workforce Analysis at the Health Resources and Services Administration (HRSA).

Dr. Lupu's other work cited by the IOM was a study she did with students during a class she taught at the GW Milken Institute School of Public Health, examining how many schools of health policy offered classes regarding palliative care. They found that only three schools of public health, including GW, offered courses addressing palliative care policy. "It was simple, but we put a number on it," says Dr. Lupu.

"The IOM report gives us a roadmap for the next steps in improving care for those who are seriously ill and dying," says Dr. Lupu. "Our work at the Center for Aging, Health and Humanities (see sidebar) is already at the forefront of these issues. For instance, we already provide inter-professional education—which the IOM called for—in our community education programs in gerontology and palliative care. Our online modules on geriatrics using a palliative care framework are already implementing another IOM recommendation—bringing basic palliative care principles into the mainstream of other specialties. We will continue to lead creative approaches to the policy and educational challenges laid out by the IOM report."

"It was gratifying to see our past work

influencing this major policy roadmap, but we can't rest on those laurels. We are thinking about how to move forward. What's innovative? How do we build the things that will address the problems?" says Dr. Lupu. She is currently consulting with the AAHPM on a project called "Measuring What Matters" to select a core set of quality measures for palliative care applicable across all settings. The IOM report cited this project in the chapter addressing the need to measure and improve palliative care quality.

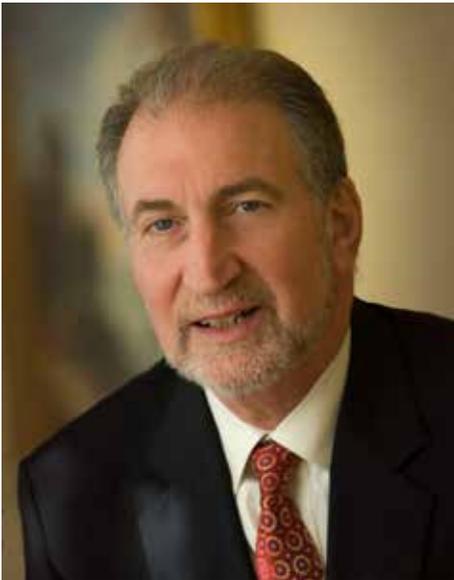
"A leading edge of palliative care is moving beyond hospice, beyond cancer and into the care of people with other serious illnesses. Right now, I'm working with the Coalition for the Supportive Care of Kidney Patients to transform care of patients with advanced kidney care," says Dr. Lupu. "About one out of five patients on dialysis die each year, but nephrologists and dialysis center staff are typically very uncomfortable talking about options or offering supportive care approaches. I'm helping the coalition change that using all the tools that the IOM report discusses: education, quality measures, policy and reimbursement. It has to be a comprehensive approach."

GW SON is committed to the issue of aging, the related issues of hospice and palliative care, and raising awareness of these issues as the American population ages and needs resources in these areas. [GW](#)

Center on Aging, Health & Humanities

The center focuses on the humanities and creative arts to promote healing and wellness throughout the life span. It is an interprofessional effort led by Assistant Professor Beverly Lunsford, PhD, and brings together schools and departments across the university. The center also houses the Washington DC Area Geriatric Education Center Consortium (WAGECC), which provides education and training to health care professionals with the ultimate goal of improving the health, quality of life, and potential of older persons, particularly those in underserved areas.

FOR MORE INFORMATION about the Center, please visit cahh.gwu.edu.



HEALTH WORKFORCE EXPERT JOINS FACULTY

As our nation's health care system evolves, the Affordable Care Act is implemented, and our population ages, it is critical that health care leaders understand the workforce. Ed Salsberg, MPH, has built a career focused on these issues and recently joined the School of Nursing faculty.

Mr. Salsberg, who has worked on nursing workforce issues for several decades, studies topics related to distribution, education and training, as well as broader health workforce matters and how nurses fit into the delivery of care.

Most recently, he served as founding director of the National Center for Health Workforce Analysis at the Health Resources and Services Administration (HRSA), established in 2010. The center is responsible for providing health workforce information and data to assist national and state health workforce policies, as well as health and education sector decision-making related to the health workforce.

Prior to joining HRSA, Mr. Salsberg was founding director of the Center for Workforce Studies and senior director at the Association of American Medical Colleges (AAMC). The center was established in 2004 to inform the medical education community, policymakers, and the public about the nation's current and future physician workforce needs. Before joining AAMC, Mr. Salsberg was the executive director of the Center for Health Workforce Studies, which he established in 1996 at the School of Public Health at the University at Albany of the State University of New York. From 1984 to 1996, he was a bureau director at the New York State Department of Health.

"The School of Nursing is very pleased to have Ed Salsberg join us," says Dean Jean Johnson. "He will be a key member of the GW Workforce Initiative, which draws on expertise from the School of Nursing, Milken Institute School of Public Health, and School of Medicine and Health Sciences to better understand factors impacting supply and demand of the health workforce."

"How we blend information together to assure access to high-quality, cost-effective care," says Mr. Salsberg, "is critical to informing health policy." In addition, he has recognized the need to have accurate data on the nurse practitioner (NP) workforce and continues to explore strategies to develop a national ongoing NP database.

"One of the big workforce issues is will we have shortages? To understand that, one needs to understand what roles nurses and physicians have, and how they might be changing," he says. These studies allow nursing leaders to better provide guidance about how to train and educate nurses.

Mr. Salsberg sees his role as providing input to policymakers and the health profession at large. "GW can play a special role in helping inform national policy around the health workforce," he says. "It's a great opportunity to build on the resources we have here in Washington, DC." [GW](#)

NURSING AND HEALTH SERVICES RESEARCHER JOINS FACULTY

The School of Nursing recently welcomed Jeongyoung Park, BSN, PhD, as its newest researcher. Dr. Park comes to GW from the Association of American Medical Colleges (AAMC) Center for Workforce Studies where she was a senior researcher.

"Dr. Park is a wonderful addition to the faculty with her background in both nursing and health services research," says Jessica Greene, PhD, MPH, associate dean for research. "It is exciting the School of Nursing's health policy research capacity is continuing to grow."

At SON, she is continuing her work studying health policy issues in long-term care such as payment system changes, health care delivery changes, and how the workforce and patient outcomes are affected.

She earned her BSN from the College of Nursing at Seoul National University in Korea and then practiced as a registered nurse there for two years. Volunteering in the field of community health sparked her interest in health policy, says Dr. Park, so she went on to earn a master's degree in health care management and policy before coming to the United States to pursue her research interests.

Dr. Park earned a PhD in health policy and administration (with a concentration in economics) at the University of North Carolina at Chapel Hill, and completed a two-year post-doctoral fellowship in health services research at the University of Pennsylvania. Dr. Park says she became interested in health economics because economic disparities explain many fundamental issues in health care.

"I have a nursing background and always wanted to address health policy-related issues that affect nursing care," she says. "There are not many nursing schools



working on health policy, so I was very excited about this opportunity at the GW School of Nursing, where health policy is a top priority." [GW](#)



EMPOWERING PATIENTS TO USE DATA IN EVALUATING HEALTH CARE CHOICES

To help bring health care data out of the shadows, the Robert Wood Johnson Foundation (RWJF) sponsored the National Summit on Health Care Price, Cost and Quality in December 2013 in Washington, DC.

Two School of Nursing faculty members presented at this major national forum, which examined how consumers can be motivated to use data in the evaluation of their health care choices.

Assistant Research Professor Ellen Kurtzman, MPH, RN, FAAN, presented research that focused on a review of published evidence. She found that patients appreciate information that is easy to understand, and is presented in multiple ways. According to Ms. Kurtzman's findings, subjective information and referrals also contribute to patients' decision-making.

Associate Dean for Research Jessica Greene, PhD, MPH, presented research that is part of her work with the RWJF Aligning Forces for Quality (AF4Q) Evaluation (see page 27 for more information).

To test patient interest in cost information and how it is presented, Dr. Greene conducted an online study of 471 employees of a company who were

asked to make hypothetical choices based on how the information was presented. Her findings showed that consumers do care about cost, want information presented simply, with access to additional information in consumer-friendly language.

"There are increasing public and private efforts to publicly report health care provider quality performance, so that consumers can 'vote with their feet' and select high quality health care providers," says Dr. Greene. "However, the number of individuals using public reports has been very limited. Our interests are in how to best present the information so that patients are empowered to choose the care that best suits their needs." *GW*

VERMONT'S BLUEPRINT FOR HEALTH

While dramatic changes have occurred in the health care landscape since the passage of the Affordable Care Act (ACA) in 2010, some states were studying potential health care reform prior to the ACA. Vermont is one of those states, having originally passed an initiative for sustainable health care delivery reform in 2006, and modifying it in 2007, 2008, and 2010.

Blueprint for Health is a "program for integrating a system of health care for patients, improving the health of the overall population, and improving control

over health care costs by promoting health maintenance, prevention, and care coordination and management," according to its annual report.

Esther Emard, RN, MSN, MSLIR, an instructor at the School of Nursing, has served as a member of Blueprint for Health's executive committee and expansion design and evaluation committee since 2011. At the time of her appointment, she was chief operating officer of the National Committee for Quality Assurance (NCQA), and she is deeply committed to using evidence-based practice to improve care delivery.

"The research is clear: if you improve the health of a population, that's a way to prolong life, reduce chronic conditions, and reduce health care costs," Ms. Emard says. "If you are fortunate to play an active role in that, it's a real privilege."

Vermont's Blueprint for Health is a public-private, multi-pronged model dedicated to NCQA recognition of advanced primary care practices at patient-centered medical homes, establishing multidisciplinary community health teams to provide target populations with multidisciplinary health services, creating self-management programs to help people adopt healthier lifestyles, implementing insurance payment reforms and health information technology, and establishing an evaluation system to determine the impact.

"I'm particularly proud of the role nursing has played as part of the team," Ms. Emard says. "Vermont's Blueprint for Health is a very good example of how all aspects of a state, all agencies in a state, working together can substantially improve care." *GW*

FOR MORE INFORMATION about Vermont's Blueprint for Health, please visit <http://hcr.vermont.gov/blueprint>.



What the ACA Means to Patients and Providers

As national conversation centers around implementation of the Affordable Care Act (ACA), Dean Jean Johnson, PHD, RN, FAAN, participated in an expert panel at an event dedicated to understanding this major transition in the world of health care. “Countdown to Transformation: A Roadmap for Health Care’s Next Era—90 Days Out” was hosted by the National Journal.

Other organizations represented on the panel included the American Cancer Society, Cedars-Sinai Medical Center, Arlington Free Clinic, the American Society for Clinical Laboratory Science, and Pfizer, Inc.

The ACA is a transformative law that permanently influences the health care available to Americans and enables patients to be more engaged with the decision-making surrounding their care.

“Innovation will be pushed by our consumers of health care,” says Dean Johnson. “They are going to push all of us to really look at doing things differently and probably more efficiently and effectively because it will be demanded.”



While the law brings important changes in insurance coverage, such as ensuring those with preexisting conditions are eligible for coverage and eliminating yearly and lifetime caps, the influx of an estimated 32 million Americans who will gain coverage by 2019 compels changes in the health care industry. Under the ACA, the emphasis is on health care outcomes, calling on everyone who serves patients—physicians, nurses, pharmacists and others—to work cooperatively for their patients. This requires the health care industry to examine the care it provides.

Patients already have access to much health care information, and the ACA recognizes the desire of patients to be involved in their care, Dean Johnson says.

Providers should also be creative in communicating with their patients, she continues. “We are only at the very beginning of understanding how to use

social media and to connect with patients through electronic means, or seeing groups of patients. Group visits are proving effective,” she says.

Dean Johnson and the other experts on the panel agreed the centerpiece of the ACA, in addition to expanded coverage, is wide access to preventive services, making primary care providers key.

With millions of people gaining coverage, workforce issues are a challenge with no quick fix. While the ACA includes funding to expand primary care providers through training and loan repayment programs, it is incumbent upon the states to expand their scope-of-practice laws for nurse practitioners (NPs), says Dean Johnson. NPs can be trained more quickly and at one-quarter of the cost it takes to produce physicians.

Seventeen states and Washington, DC, allow NPs to practice independently, but the rest of the country requires some level of supervision by physicians, either when writing prescriptions or in diagnosis. In the states with more limited scope of practice for NPs, there is also a greater need for primary care, says Dean Johnson. Expanding the role of nurse practitioners in these states would quickly fill in the gaps.

PATIENT SAFETY AND HEALTH QUALITY

Through a unique collaboration with the Robert Wood Johnson Foundation (RWJF), the School of Nursing has developed, produced, and disseminated *Charting Nursing’s Future* (CNF) since 2012. CNF is a RWJF policy publication about nurses and the nursing profession.

The most current issue of CNF is devoted to patient safety and health care quality. The brief addresses six health care management practices and workplace improvements emphasized by the Institute of Medicine (IOM) as having the greatest potential to enhance patient safety: empowering and engaging frontline nurses in quality improvement, ensuring adequate nurse staffing, combating disruptive behavior, harnessing nurse leadership, and

fostering interprofessional collaboration (IOM, *Keeping Patients Safe: Transforming the Work Environment of Nurses*, 2004). The CNF brief highlights progress and persistent gaps in these areas and showcases research, policies, and tools with the potential to further advance this transformation.

“The strategies presented in the brief can be used by providers, policymakers, and educators to transform nurses’ work environments and safeguard patient health,” says Ellen Kurtzman, MPH, RN, FAAN, assistant research professor and CNF project director.

Previous issues of CNF produced under this unique collaboration are devoted to academic progression in nursing and RWJF’s sustained commitment to improving health and health care through nursing. [gw](#)

CNF IS A FREE PUBLICATION. If you would like to subscribe or view issues online, please visit: www.rwjf.org/goto/cnf.





Senator Kaine Visits GW SON

Senator Tim Kaine (D-Va.) in December attended the graduating Accelerated BSN students' final project capstone presentation, stopping to ask each group of students about their studies and future plans.

The senator also praised GW SON's newest initiative, the Veterans BSN, which enables veterans to receive academic training for some of their military experience and provides tailored support services to veterans.

His visit included a tour of the Skills & Simulation Lab at the School of Nursing's Virginia campus, accompanied by GW President Steven Knapp.

During the tour, Senator Kaine spoke with students, lab Director Patricia Davis, and Senior Associate Dean Mary Jean Schumann while they demonstrated how the lab's 21 manikins are used to simulate patient interactions.

Studying nursing "puts you in a wonderful position," the senator told graduating students. "Nurses are finding the scope of their professional practice expanding more and more," he said.

Education in nursing is relevant to many jobs, the senator said, sharing a story about his former staffer Marilyn Tavenner, who earned a nursing degree from a Virginia community college and is now administrator of the Centers for Medicare and Medicaid Services, with a budget even larger than that of the Department of Defense, he said.

"The number of fields you're equipping yourself for is really amazing," Senator Kaine said.

SPOTLIGHTING HEALTH INFORMATION POLICY

"Health Information, Big Data & Quality of Care" took center stage at a wide-ranging policy discussion in January between Dean Jean Johnson and Department of Health and Human Services (HHS) Deputy National Coordinator for Programs and Policy for Health IT Judy Murphy, RN, FACMI, FHIMSS, FAAN. The special policy event was co-hosted by the deans of the Virginia Science and Technology Campus and School of Nursing.

During their onstage policy conversation, Dr. Murphy and Dean Johnson touched on everything from definitions associated with health informatics to the rise of quick care centers in pharmacies, broadband connectivity in rural areas, and patients' engagement with their own health care—and how it all relates to the implementation of electronic health records, quality care, and big data.

Electronic health records (EHRs), the implementation of which Dr. Murphy and ONC have led and continue to facilitate, are a way to ensure that a patient-centric record follows a patient wherever he or she goes and to provide a tool for patient engagement and improved quality of care.

"Everybody is talking accountability," said Dr. Murphy. Providers are participating in health information exchange (HIE) to better share medical information to provide more effective, efficient health care services, according to HealthIT.gov. Health care providers, including nurses, pharmacists and specialists, in addition to a patient's primary care doctor have that accountability, and so do patients.

"Patient engagement and the patient-centric record really do go hand-in-hand," Dr. Murphy said.

Just as the move from typewriters to computers made it easier for people to change their documents, allowing for a whole new way of editing and subsequently raising the standards of what we expect, the EHRs are doing that for health care, she said. Health care providers are improving how they work with the electronic tools now available. For example, reminders about necessary tests can be automated, improving patient care and ensuring standards are met, Dr. Murphy said.

During a question-and-answer period, a nursing student asked Dr. Murphy what role she felt insurance companies played in developing the health information exchanges.

The insurance companies have as much of a role as anyone, Dr. Murphy said. Integrating payer data—such as what tests and prescriptions have been paid for—in with clinical data will only improve the picture of what health care providers know about a patient.

Other concerns about security and privacy were raised. Privacy does continue to be the number one concern of patients, Dr. Murphy said, although the federal law HIPAA is already in place. In terms of security, there is no one national depository where all health information is stored. While some states have designed their health information exchanges as depositories, others are more like routers, simply facilitating the sharing of information when a query is generated, Dr. Murphy said.

Dr. Murphy joined the Office of the National Coordinator for Health IT (ONC) in 2011 with more than 25 years of health informatics experience.

With a longstanding reputation for patient advocacy and maintaining a "patient-centric" point of view, Dr. Murphy approaches her work with unyielding energy as well as dedication, passion, and commitment to the health care transformation enabled by technology. [GW](#)



GRADUATION 2014



“While caring for patients you will see things few others ever will: the joy of birth, grief of unanticipated loss, and the resilience of a person fighting their way back through illness or injury.”

**– MAUREEN MCCAUSLAND, DNSC, RN, FAAN
KEYNOTE SPEAKER
SENIOR VICE PRESIDENT AND CHIEF NURSING OFFICER
MEDSTAR HEALTH**

The George Washington School of Nursing graduation and commencement celebrations brought together the school’s nationwide community of graduates, faculty, and staff—as well as several international graduates.

The ceremony was also the final graduation over which Dean Jean Johnson will preside, and in her charge to the graduates Dean Johnson implored them to “start anew on creating a health system that works for everyone.”

This was the School of Nursing’s largest graduation to date. More than 220 BSN, MSN, and DNP degrees and graduate

certificates were conferred.

Graduation weekend also included the BSN pinning ceremony, the DNP capstone study poster presentation, the doctoral hooding ceremony, a Sigma Theta Tau induction ceremony, and the university-wide commencement held on the National Mall. [gwu](http://www.gwu.edu)



LESSONS LEARNED FROM A NURSING LEADER

“Few professions demand the day in and day out courage that nursing does. We stand with our patients and their families often during the most significant moments of their lives, those of great joy as well as great sadness,” said Maureen McCausland, DNSc, RN, FAAN, in her keynote remarks during the graduation ceremony.

Dr. McCausland is senior vice president and chief nursing officer for MedStar Health, the largest health care provider in Maryland and the Washington, DC region.

While discussing the future that nursing holds for the new graduates, Dr. McCausland shared her perspective as a nurse leader.

As health care is reformed, “the role of the professional nurse becomes increasingly important. New models of care and reimbursement require intentional coordination across settings, with professional nurses providing elevated levels of management and oversight for quality and outcomes,” she said.

Dr. McCausland drew on her more than 30 years as a nurse leader—which includes experience as a hospital and nursing executive—in talking to the BSN graduates about their new careers and to the MSN, DNP, and certificate graduates about their expanding roles and responsibilities within the profession.

To be successful, each of the new graduates will have to “share information

and give assistance, not only to patients and families, but to each other,” said Dr. McCausland.

She also reminded the graduates to always remember why they became nurses. “While caring for patients you will see things few others ever will: the joy of birth, grief of unanticipated loss, and the resilience of a person fighting their way back through illness or injury,” Dr. McCausland said.

Dr. McCausland is a member of the American Organization of Nurse Executives (AONE), American Nurses Association (ANA), American Academy of Nursing (AAN), and the Sigma Theta Tau International (STTI) Honor Society of Nursing. [GW](#)

Dr. McCausland’s full speech is available on the School of Nursing YouTube channel at youtube.com/GWSchoolofNursing.

A NEW NURSE’S PERSPECTIVE

Accelerated BSN graduate Marcia Camden was selected as the student speaker for the School of Nursing graduation ceremony. Ms. Camden was chosen through an open nomination process.

Garnering great laughs from her fellow classmates, Ms. Camden called nursing school “the most painful, difficult, extraordinarily amazing experience.”

While the responsibility of caring for others is both a privilege and a burden, it is one that her class has willingly accepted, she said.

“Sometimes what seems to us like the most insignificant experience can mean all the difference in the path that another person’s life will take. By choosing the path of nursing, we have directly placed ourselves in a position to expand our sphere of influence, to be a part of something bigger than ourselves,” she said. [GW](#)

Nursing School: “the most painful, difficult, extraordinarily amazing experience.”

Ms. Camden’s full speech is available on the School of Nursing YouTube channel at youtube.com/GWSchoolofNursing.





The graduates from left to right are: Victoria Stabinski, MSN '14, Marcia Camden, BSN '14, Nicole McCrory, BSN '14, and Margaretann House, DNP '14, MSN, FNP-C.

Three Graduates Receive Awards for Excellence

Three exceptional students were nominated by faculty and honored at the School of Nursing graduation celebration.

The **Excellence in Community Service Award** was presented to Nicole McCrory, BSN '14. Visiting Instructor Karen Dawn nominated Ms. McCrory, who in January traveled to Haiti as part of the school's medical mission there. Prior to the trip, Ms. McCrory learned basic Creole (the language of Haiti), conducted research, and worked on group projects preparing educational materials to present during the trip.

According to Dr. Dawn, Ms. McCrory used "excellent assessment skills and evidence-based practice in developing a hypertension prevention and treatment teaching program for Haitians and community health workers in the central plateau region of Haiti, a region with the highest rates of poverty and disease."

Ms. McCrory says she eventually wants to become a nurse practitioner and work in the field of public health.

The **Excellence in Innovation Award** was presented to Victoria Stabinski, MSN '14, who used her own experience battling breast cancer to reach out to patients with similar medical diagnoses in an effort to help them better understand breast cancer management

and treatment. Assistant Professor Linda Briggs nominated Ms. Stabinski for her empathetic and informative outreach to patients. Diagnosed in the fall of 2013, Ms. Stabinski underwent chemotherapy and a bilateral mastectomy and still completed her assignments, exams, and clinical hours on time.

Having learned about the disease—medically, professionally and personally—Ms. Stabinski is sharing her story in order to help others. She created a PowerPoint presentation, "Triple Positive Breast Cancer, My Case of Invasive Ductal Carcinoma."

In her nursing career thus far, Ms. Stabinski has been active in the Virginia Commonwealth Nurse Practitioner Association (VCNP) and served as a preceptor for student nurses and new employees.

The **Excellence in Research Award** was presented to Margaretann House, DNP '14, MSN, FNP-C. Her exceptional doctoral capstone study was "A Comparison of Male and Female Nurses' Perceptions of Gender Issues, Job Satisfaction and Job Stress, and Their Intention to Leave Work." Dr. House was nominated by Assistant Professor Quiping (Pearl) Zhou for her high-quality research study, which involved 504 participants.

Dr. House works at Wake Heart & Vascular in North Carolina and is a clinical instructor with the University of North Carolina. For her, nursing is a rewarding profession because she makes a difference in people's lives and each of her patients makes an impression on her own life.

SIMULATING LIFE

HIGH-TECH MANIKINS PREPARE NURSING
STUDENTS FOR PATIENT CARE

BY LAURA HAMBLETON



Accelerated BSN students Daniel Mehan, Rachel Sajous, and Bruga Shah care for Col. Kent Water, a high-tech manikin, at SON's Skills and Simulation Lab.

Bruga Shah, an accelerated Bachelor of Science in Nursing (BSN) student, tended to the patient in his hospital bed as she would any other. Ms. Shah was gentle and thorough, asking pertinent questions and teasing out the patient's history. Later when asked about the exchange, she was circumspect, not wanting

to tell too many personal details or even reveal the patient's identity.

Her patient was a manikin, a simulated person with the name Kent Water. He is among a group of lifelike manikins—made of cloth, plastic, and advanced electronics, with blinking eyes, a pulse, a breath, and bowel sounds, among other realistic attributes—at the Skills and Simulation Laboratory at the School of Nursing.

"I'm not supposed to name my patients for privacy reasons," says Ms. Shah, who applies the lessons she is learning in nursing school to her work with the manikins. "It's very important we start this at the beginning. I've learned to treat them as humans, so when I go to a hospital everything will be second nature. As I talk with a manikin, or when I'm taking his vital signs or lab work, I see a real patient."

Months before students in the accelerated BSN program step into a real hospital, they practice on high-tech manikins such as Kent Water in a 6,300-square-foot lab. The lab has 21 mock hospital bed stations and exam areas, as well as a home health studio apartment.

Nursing faculty members act almost as stage managers to create the feel of an authentic hospital. They manipulate the manikins from behind a one-way glass control center, sometimes sending the manikins' hearts racing or slowing their breath to mimic a health crisis. Each detail in the lab can be found in a hospital, down to blinking EKG monitors and IV bags. Each manikin has a story and an evolving health profile.

Faculty members introduce accelerated BSN students to the Skills and Simulation Lab during their first semester. In the beginning, students are assigned simple tasks and are reminded to wash their hands before dealing with each new patient. Students learn to take patient histories, write charts, move patients in and out of bed, and position bedpans.

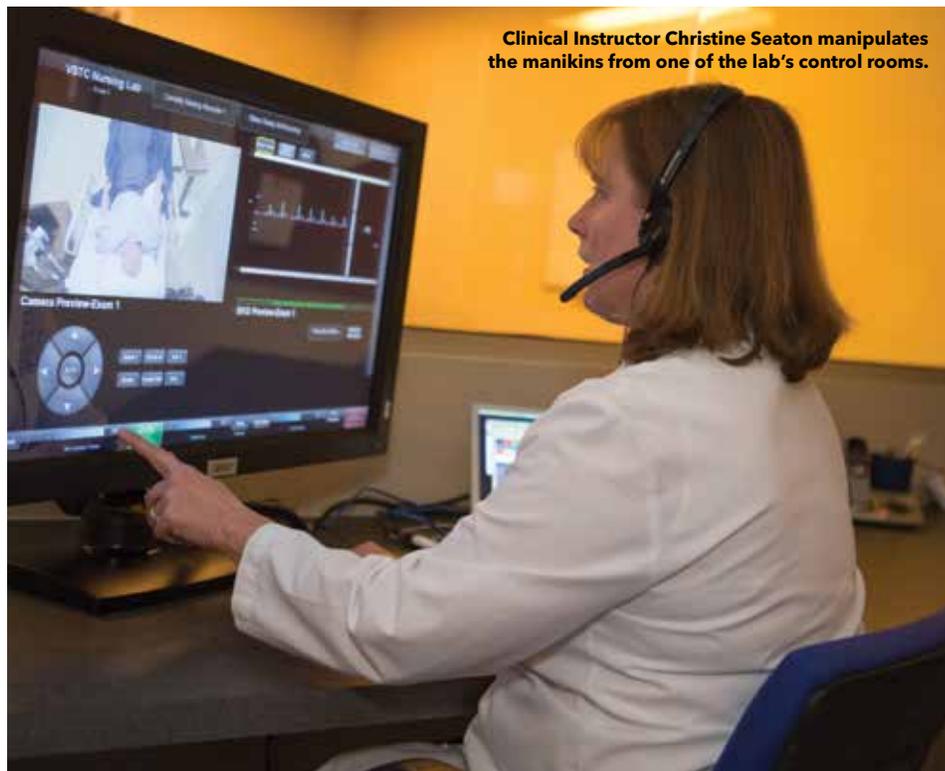
As the nursing students' skills become more sophisticated, they begin to administer medications and attach IV drips. By the last semester of the program, students work in a virtual hospital with multiple patient scenarios happening at the same time and at the swift pace of a typical clinical setting.

"Students begin to really care about the manikins and attach to them," says Patricia Davis, director of the Skills and Simulation Lab. "I regularly see the students talking with the manikins as though they are real patients, connecting with their patients."

Kent Water is a patient whose story is unfolding, just as real patients' stories unfold over time, says Christine Seaton, a clinical instructor. So far, he is a 36-year-old retired lieutenant colonel, though his date of birth is "open ended to serve us from year to year since students must check this," Ms. Seaton says.

Col. Water weighs 180 pounds and is almost 6 feet tall. He is allergic to mold and pollen. "This manikin is actually one of our heavier ones, which adds to the realism," Ms. Seaton explains, "especially since students may have to administer medication based on weight or reposition him as needed. Col. Water's allergies are important to determine before giving medication."

During the past semester, Col. Water became a familiar face in the lab, coming



Clinical Instructor Christine Seaton manipulates the manikins from one of the lab's control rooms.

in for care on two different occasions, with two different ailments. Students first met him after he had surgery for his kidney stones.

Accelerated BSN student Daniel Mehan's encounter with Col. Water was a little "eerie because the manikins are so lifelike: They blink, they breathe, their chests rise and fall," he says. "It's like working with a real person, only they can't move," explains Mr. Mehan.

In one instance, Col. Water was in a great deal of pain. He had a nephrostomy tube attached to his body to drain urine, which gave him a festering wound. "I had to take care of a wound around his nephrostomy tube," Ms. Shah says. "Pain was the main concern. I first assessed Col. Water before giving pain medication. We used morphine. I checked his vital signs so he wouldn't go into respiratory arrest."

She asked Col. Water his pain level on a scale of 10. Six, a faculty member professor responded for him from the control room. Ms. Shah hooked Col. Kent up to a morphine drip and left him for a few minutes. When she returned, she again asked him his pain level.

The answer from the control room this time: one. She cleaned up a wound near the nephrostomy tube and administered antibiotics through an IV drip. Col. Water recovered and was eventually discharged.

A few weeks later, though, Col. Water returned with a badly burned hand. "Since

it was winter, he was starting a fire when he was burned," Ms. Seaton explains. "If it had been the fall or spring, he might have been grilling."

The burn on Col. Water's hand was realistic looking, and the nursing students irrigated the wound with a saline cleanse, applied a bandage, and talked with him about the care they were providing. "It's helpful for patients to have continuity of care," says Ms. Shah, adding that she appreciates the practice at the Skills and Simulation Lab. "We follow protocols and provide care so many times on the manikins, so we know our technique is good and we are prepared to care for real patients."

Mr. Mehan agrees about the value of learning to provide patient care in the Skills and Simulation Lab. "It builds confidence to have a place where we can learn in a realistic setting," he says. "It's a very nice pairing with what we do with actual patients. I was surprised by how much I have to prepare for sessions in the Sim Lab. I have to read in advance about a procedure and then learn to accurately perform that procedure in the lab."

Lessons, care protocols, and procedures are reinforced in the Skills and Simulation Lab and stay with students after graduation. And even if Col. Kent Water looks like a doll, Mr. Shah says, "you start seeing a life inside that manikin." **GW**

FACULTY + STUDENT NEWS



Dawson Named Emeritus Professor

The School of Nursing (SON) proudly conferred the status of professor emeritus on Ellen M. Dawson, PhD, RN, ANP, in May. SON's first professor emeritus, Dr. Dawson provided longtime exemplary service and leadership to academic nursing at GW since her arrival in 2005.

Dr. Dawson led the development of nursing programs at GW as the first chair of the Department of Nursing Education and was critical to the establishment of the School of Nursing, where she served as the founding senior associate dean for academic affairs. She demonstrated

leadership in building the faculty; expanding nursing academic offerings to include the Bachelor of Science in Nursing (BSN), Master of Science in Nursing (MSN), and Doctor of Nursing Practice (DNP) degree programs; creating the state-of-the-art Skills and Simulation Laboratory; and leading multiple major grant initiatives and programs. As a major force in the activities and success of the School of Nursing, Dr. Dawson created a tremendous legacy both at SON and at the university.

In 2012, Dr. Dawson, along with her husband, Howard W. Dawson, USN, Ret., and their children, Michael and Maureen, generously made the school's first endowed gift of \$100,000 to the School of Nursing. Through their gift, the Dawson Endowed Scholarship supports outstanding students in the Associate Degree of Nursing (ADN) to BSN/MSN pathway each year. [GW](#)

SON Introduces New Associate Deans

The School of Nursing has grown steadily in both numbers of students and faculty members since its inception in 2010, and the education of advanced practice registered nurses continues to evolve.

In an effort to build on the success and better position the school for continued growth, SON's organizational structure was modified this year to create two divisions—the Division of Undergraduate Studies and the Division of Graduate Studies. To support the school and these divisions, four faculty members were elevated to the roles of associate dean in the areas of undergraduate studies, graduate studies, research, and faculty affairs.

Assistant Professor Billinda Tebbenhoff, DNP, RN, PMHCNS, who previously served as director of the Bachelor of Science in Nursing (BSN) program, is now associate dean for undergraduate studies. Dr. Tebbenhoff sees a multifaceted future for the school and undergraduate studies. "We want to continue to prepare superior nurses who will become leaders in health policy quality and safety, to lead in the creation and implementation of clinical simulation science, to support the transition of veterans to the nursing workforce, and to facilitate the educational advancement of nurses as they complete their BSN degree," she says.

Associate Professor Christine Pintz, PhD, RN, FNP-BC, FAANP, who previously was director of the Doctor of Nursing Practice (DNP) program, is now associate dean for graduate studies. "It is an exciting time to be involved in nursing education," says Dr. Pintz. "With the passage of the Affordable Care Act, there will be more opportunities for nurses to be involved in advanced clinical and leadership roles. At GW, we have many programs that enable nurses to expand their practice and become leaders in health care."

Professor Jessica Greene, PhD, MDP, who previously served as director of research,

Drs. Kimberly Acquaviva, Jessica Greene, Billinda Tebbenhoff, and Christine Pintz appointed as associate deans.

School of Nursing

THE GEORGE WASHINGTON UNIVERSITY



is now associate dean for research. In this role, Dr. Greene leads the school's research endeavors and progress is underway in achieving the goals of expanding research. "Toward our goal, this year we had a group of faculty work collaboratively on a research project examining whether prior direct nursing care experience was related to educational success among advanced practice nursing students," says Dr. Greene. I'm happy to say this paper has been submitted to a peer review journal."

In other research news, the school added two new research faculty members this year, Ed Salsberg and Jeongyoung Park (see page 29).

Associate Professor Kimberly Acquaviva, PhD, MSW, who previously served as director of faculty affairs, is now associate dean for faculty affairs. When the school was established, it had 31 full- and part-time faculty members; now there are more than 50. "We're still a relatively new school, so my role has evolved in concert with the changing

needs of the school's faculty," says Dr. Acquaviva. "I'm focusing more of my efforts now on faculty development and mentoring faculty toward promotion and tenure, and I absolutely love what I do. Our faculty members are bright, creative, and ambitious—in short, a joy to work with. My hope is that each faculty member we hire will receive the support and guidance they need, beginning on their first day at GW, to be successful in working toward promotion and tenure." [GW](#)

DNP Student Awarded Major CareFirst "Project RN" Scholarship

The CareFirst BlueCross BlueShield Nurse-Education Partnership Program—Project RN—funds scholarships for nurses seeking advanced degrees to become

educators. Student Lorrie Taylor Rilko, MSN, FNP-BC, BC-ADM, was selected for one of these scholarships.

The Project RN scholarship is an \$80,000 stipend across 36 months, beginning in the fall semester of 2014. Scholarship recipients commit to teaching in the CareFirst region for at least three years following graduation.

Project RN is part of CareFirst's continued efforts to alleviate the shortage of qualified nurse educators in Washington, DC, Maryland, and Northern Virginia. "Few know that one of the root causes of the nursing shortage is a lack of qualified nurse educators," said Maria Tildon, CareFirst's

senior vice president of public policy and community affairs. "Project RN identifies skilled candidates and gives them the tools they need to succeed as nurse educators in our communities. Without dedicated nurse educators, our health care system will continue to experience a shortage of qualified bedside nurses."

Ms. Rilko, the GW School of Nursing recipient of CareFirst's Project RN scholarship, is pursuing a DNP with a nursing education concentration. She is a board-certified family nurse practitioner

CONTINUED ON PAGE 40

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who has practiced in primary care settings in Northern Virginia since 1991.

Ms. Rilko earned an adult nurse practitioner Master of Science in Nursing (MSN) from George Mason University in 1991, a program then offered in conjunction with the George Washington University. She returned to GW for a post-graduate certificate as a family nurse practitioner in 1998.

"We are so pleased to be able to provide this opportunity for our DNP students. Ms Rilko exemplifies the type of student that this scholarship was designed for. She is an expert clinician who is pursuing her doctorate to advance herself professionally and to develop the knowledge and skills needed to become a nursing educator," says Associate Dean for Graduate Studies Christine Pintz.

In her more than 30 years of nursing experience, Ms. Rilko has worked at the Heart Transplant and Heart Failure Program at INOVA Fairfax Hospital, and volunteered at the Fauquier Free Clinic where she cared for a wide variety of medical issues in this underserved population. She currently runs an occupational walk-in clinic for a campus of 1,300 employees.

"It is such a great honor to have been awarded this scholarship," says Ms. Rilko. "I hope to one day teach at the GW School of Nursing and assist in providing the exceptional educational opportunities that I have experienced at this university." [GW](#)



Two DNP Students Named Jonas Scholars

Two GW School of Nursing Doctor of Nursing (DNP) students were named Jonas Scholars, a prestigious national recognition. Tara Brandner was selected as the Jonas Nurse Leader Scholar, and Joe Smith was named the Jonas Veterans Healthcare Scholar.

Both Ms. Brandner and Mr. Smith are DNP family nurse practitioner students who began their studies at GW in the fall of 2013. As Jonas Scholars, they each received a \$20,000 School of Nursing institutional grant that includes matched funds from the Jonas Center for Nursing and Veterans Healthcare. The Jonas Center, a leading philanthropic funder for nursing, is pursuing a national effort to stem the nursing faculty shortage and prepare future nurse educators and leaders.

"We are pleased these students are part of the Jonas Program. They receive scholarship funds and participate in a leadership development program through which they meet doctoral students across the country. Tara Brandner and Joe Smith are outstanding students academically and will go on to be future leaders in nursing," says Christine Pintz, associate dean for graduate studies.

Ms. Brandner is in Ashley, ND, and works as a nurse practitioner in a rural community clinic. She says her "passion for patient care started in high school when she worked as a member of the local volunteer ambulance squad." Ms. Brandner earned her BSN at the University of Mary in Bismarck, ND. Her work background consists of rural hospital, oncology, plastic surgery, travel work, and float pool (ICU, telemetry, surgical, ER). As a nurse, she has served on several committees such as nursing cabinet, rounding committee, Lean Six Sigma, and the professional practice committee. She is a member of the GW Golden Key Honor Society and Phi Epsilon Chapter of Sigma Theta Tau.

"As a Jonas Scholar, my research interest stems back to my community which is in an under-served area in rural North

Dakota," says Ms. Brandner. "The majority of the patient population here are elderly people with chronic health conditions.

A major contributing factor to these health conditions is a lack of patient education and guidance in healthy lifestyle modifications while living in a rural setting." Ms. Brandner's research and patient care will focus on the impact of lifestyle modifications on chronic diseases, and work towards bridging the gap between patients and available education.

Mr. Smith earned his BSN from Northwest University in Kirkland, WA. He has worked at the Veterans Affairs Hospital in Seattle for four years, three of which were in oncology. "I find absolute joy in helping nurse veterans back to health, and even more so, I find it an honor that I can serve those who have served," he says. Mr. Smith's interest in nursing derives from his faith and he says he seeks "to be an extension of God's love to humanity, and I do that through nursing, which is more than simply treating symptoms...the special reward of my practice is the ability to be with someone on hospice in their final moments."

"Veterans have a special place in my heart for myriad reasons, ranging from my father being a 20-year veteran to the acts of heroism and bravery they have demonstrated. This grant gives me an opportunity to enhance the care for veterans, improve outcomes, and give back as an educator," says Mr. Smith. [GW](#)



Pintz Inducted as AANP Fellow

Associate Professor and Associate Dean for Graduate Studies Christine Pintz, PhD, RN, FNP-BC, FAANP, was inducted as an American Association of Nurse Practitioners (AANP) Fellow at the organization's annual national conference in June.

This prestigious recognition honors Dr. Pintz's manifold contributions as a nurse practitioner leader—through education, practice, research, and active involvement in national organizations.

Dr. Pintz, who has taught nursing at GW since 1998, coordinated the family nurse practitioner Master of Science in Nursing (MSN) program, guiding it from an on-campus to online program. The program is currently ranked fourth out of more than 130 programs nationwide by US News & World Report. She also developed and directed the Doctor of Nursing program, which launched in 2007 and now includes

post-BSN and post-MSN options in eight fields of study.

An expert in the use of technology and distance education in graduate nursing education, she frequently publishes and presents on topics pertaining to the use of educational technology and collaboration in online learning. She was a member of the Baruch College/GW Interdisciplinary Nursing Quality Research Initiative team, which was part of the "Developing and Testing Nursing Quality Measures with Consumers and Patients" study funded by the Robert Wood Johnson Foundation.

Dr. Pintz has received funding from the Health Services and Resources Association for an Advanced Education Nursing Grant and an Advanced Education Nursing Traineeship Grant to support graduate nursing education. She is also an investigator for an Innovation in Diversity and Inclusion grant called Examining Online Master's Students' Resources, Strategies, and Practices for Success funded by the GW Office for Diversity and Inclusion. In addition, she is studying hospital-based nursing research and its impact on



economic and care delivery outcomes.

A family nurse practitioner since 1988, Dr. Pintz is certified in obstetrics and gynecology and currently practices at the Arlington Free Clinic in Virginia.

"Being a nurse practitioner has provided me with the opportunity to work closely with patients and to have a more active role in the management of patients' health care," she says. "It has also allowed me to focus on the aspects of health care that I love—forming a partnership with my patients to promote and improve their health. To be recognized for my achievements as a nurse practitioner is a special honor." [GW](#)

Malliarakis Now an AAN Fellow

Assistant Professor Kate Driscoll Malliarakis was inducted as an American Academy of Nursing (AAN) Fellow in October during the academy's annual conference, held this year in Washington, DC.

AAN Fellowship recognizes significant contributions to nursing and health care, and sponsorship by two current Academy Fellows. This year, 168 nurse leaders were inducted. According to the AAN, selection is based in part "on the extent the nominee's nursing career has influenced health policies and the health and well-being of all."

Dr. Malliarakis' contributions to health care are extensive. She has worked in the White House Office of National Drug Control Policy, was a Robert Wood Johnson Foundation (RWJF) Fellow in the Executive Nurse Leader Fellows program, serves as the president of the RWJF Executive Nurse Fellows Alumni Association, and currently

chairs the Committee on Impaired Nurses for the DC Board of Nursing. For the School of Nursing, Dr. Malliarakis is the director of the nursing leadership and management Master of Science in Nursing (MSN) program and executive leadership Doctor of Nursing Practice (DNP). She is the chair of the Admissions Committee, member of the Curriculum Committee, and is a peer reviewer for Quality Matters.

Dr. Malliarakis came to GW in 2005. She has special expertise in addictions and recovery for health professionals.

Her published works include frequent contributions to DC Nurse, a publication of the District of Columbia Board of Nursing. She coauthored "Substance abuse: Risks factors and protective factors" and "Regulatory management of substance use in high-risk nurse populations" both in the 2012 Journal of Nursing Regulation. Dr. Malliarakis is a frequent national and local lecturer on addictions among health professionals.

"It was wonderful to be recognized by my colleagues in the nursing profession at the induction ceremony," Dr. Malliarakis



said. "This award means so much to me. An honor like this makes my career even more gratifying."

Dr. Malliarakis holds a PhD in health sciences from Walden University, a nurse practitioner certificate from the University of Maryland-Baltimore, a Master of Science in Management with a specialty in substance abuse systems from Lesley University, and a Bachelor of Science in Nursing (BSN) degree, which she earned at Fitchburg State University in Massachusetts. She is licensed and certified as an adult primary care nurse practitioner and master addictions counselor. [GW](#)

Kurtzman Awarded Prestigious Fellowship

Assistant Research Professor Ellen Kurtzman, MPH, RN, FAAN, is the 2014 Centers for Disease Control and Prevention (CDC) National Center for Health Statistics (NCHS)/AcademyHealth Health Policy Fellow.

The prestigious program brings visiting scholars in health services research-related disciplines to NCHS to conduct studies of interest to policymakers and the health services research community. NCHS is the nation's principal health statistics agency, providing data to identify and address health issues, and AcademyHealth works to advance the fields of health services research and health policy through the transfer of relevant information across the research and policy arenas.

Ms. Kurtzman began the fellowship in September and will serve full-time in residence at NCHS in Hyattsville, MD, for 13 months. This provides her with access to NCHS data systems and opportunities to work with NCHS staff. The program aims to foster collaboration between visiting scholars and NCHS staff on a wide range of topics of mutual interest and produce credible science that will inform the policy community.

"The NCHS has some of the nation's brightest and most capable statisticians and econometricians," says Ms. Kurtzman. "To be able to learn from them, and potentially collaborate with them, is really a gift."

As the 2014 fellow, Ms. Kurtzman is working on a project titled Do States' Scope of Practice Laws Influence the Quality of Care Delivered by Nurse Practitioners?



The project relies on the community health center (CHC) subsample of the National Ambulatory Medicare Care Survey (NAMCS), a national survey which collects information about the provision and use of ambulatory medical care services.

"The research I'm pursuing is incredibly policy relevant, and important to the nursing profession and community," says Ms. Kurtzman. "I'm excited about doing policy-relevant research that contributes to the field. It will answer some burning questions."

Ms. Kurtzman has been at GW since 2007, and for nearly a decade has been working in the field of patient safety and health care quality. Prior to her arrival at GW, she was the architect of National Quality Forum-endorsed (NQF) consensus standards for measuring nursing's contribution to quality. While at NQF, Ms. Kurtzman also led national efforts to establish hospital and home health care quality and performance standards. In advancing these causes, she has published and presented on nursing performance measurement, public reporting, and quality issues.

For the past several years, Ms. Kurtzman has been collaborating with colleagues at the University of Pennsylvania School of Nursing, under the direction of Dr. Mary Naylor, to advance a model of care for chronically ill elderly referred to as the Transitional Care Model (TCM). In this capacity, Ms. Kurtzman has been promoting TCM and building policy support for its widespread adoption.

Ms. Kurtzman has served in senior capacities for large, national health services organizations including the American Health Care Association (AHCA), National PACE Association, American Red Cross, and The Partnership for Behavioral Healthcare. She was honored to serve as a senior examiner for the Malcolm Baldrige National Quality Award and examiner for the US Senate Productivity and Maryland Quality Awards.

"As the School of Nursing continues to build its health policy and research capacity, I'm excited to be able to contribute to that building, to create bridges to NCHS which holds some of the nation's most important data for studying health and health care, and to generate high level science and policy-relevant research that will be nationally featured," Ms. Kurtzman says. [GW](#)



Caulfield Named Gold Humanism Scholar

Congratulations go to Assistant Professor Kristin Caulfield, RN, PhD, who was named a Gold Humanism Scholar by the Arnold P. Gold Foundation.

The foundation supports health profession educators "to develop and enhance educational projects focused on achieving humanistic patient care" replicable across various delivery settings.

Dr. Caulfield's project, Patients as Partners, is a novel curriculum that examines patient engagement and person-centered care as a practice philosophy for incoming nurse practitioner (NP) students. The curriculum, which is rooted in humanism, explores how NPs can best meet both the physical and emotional needs of their patients.

As a Gold Humanism Scholar, Dr. Caulfield attended the Harvard Macy Institute 2014 Program for Educators—an intensive scholar-in-residence program at Harvard University.

"I am really excited about this opportunity and feel honored to have been chosen as a scholar for this exceptional award and rigorous program," says Dr. Caulfield. [GW](#)

Acquaviva Appointed to National Advisory Council

Associate Dean Kimberly Acquaviva, PhD, MSW, was appointed by US Department of Health and Human Services Secretary Kathleen Sebelius to a three-year term on the National Advisory Council on Aging (NACA).

NACA consults with and makes recommendations to the director of the National Institute on Aging (NIA), director of the National Institutes of Health, the assistant secretary for health, and the secretary of health and human services. The council also considers applications for research and training and recommends funding for appropriate applications.

"It's so important to encourage innovative research and provide ongoing training for the health professionals who serve our country, and I'm glad I can contribute to this effort," says Dr. Acquaviva.

Prior to her NACA appointment, Dr. Acquaviva completed a two-year term as chair of the Friends of the National Institute on Aging, a broad-based coalition of almost 50 aging, disease, research, and patient groups supporting the mission of the NIA. In that capacity, she led the coalition's efforts to advocate on behalf of the NIA through the annual congressional budget and appropriations process and promote NIA research activities by sponsoring briefings for congressional staff. [GW](#)



Briggs Selected for National Quality Forum Committee

Assistant Professor Linda Briggs, DNP, whose research focuses on cardiovascular disease, particularly in women, was invited to serve as an expert member of the National Quality Forum (NQF) Cardiovascular Steering Committee for the Cardiovascular Endorsement Maintenance Project. Cardiovascular disease is the leading cause of death for both men and women in the United States and accounts for more than \$300 billion in health care spending annually.

Through the Steering Committee, which is composed of cardiovascular experts from across the health care profession, NQF aims to identify and endorse measures for transparency and quality improvement in areas that pertain specifically to cardiovascular health. Relevant areas of study include hypertension, coronary artery disease, acute myocardial infarction, percutaneous coronary intervention, heart failure, and atrial fibrillation. [GW](#)

Top Honor for Wyche

Research Professor Karen Fraser Wyche, PhD, was selected for the highest award given by the Society of Women in Psychology—the Carolyn Sharif Award—in recognition of her exceptional scholarly contributions to the field of psychology of women.

"I am honored to receive this award and to be recognized by my esteemed colleagues in the Society of Women in Psychology," says Dr. Wyche. Her award address, *Women's Narratives: Stress and Coping*, was presented at the American Psychological Association (APA) 121st annual convention in 2013 and published in the *Psychology of Women Quarterly* this year.

Dr. Wyche's research and writing focuses on understanding the role of gender, socio-cultural, and socio-economic factors in outcomes including mental and physical health, ethnic identity, and community-based interventions. She is project director for the school's Success in Nursing Education project, sponsored by a grant from the Department of Health and Human Services (HHS) Health Resources and Services Administration (HRSA). The project aims to attract African American, Asian, Hispanic, Native American, male, and economically disadvantaged students to the nursing profession, and provides scholarship funding, faculty mentoring, peer support, and seminars and discussions focusing on ethnic and sociocultural diversity. [GW](#)



Hats off to Hahn

Associate Professor Joyce Hahn, PhD, APRN-CNS, NEA-BC, is serving a four-year term as vice president of the Virginia Board of Nursing—the regulatory and licensing agency for nursing in the Commonwealth of Virginia. This represents Dr. Hahn's second gubernatorial appointment.

An expert in nursing education, nursing administration, and health care policy and delivery, Dr. Hahn also has received widespread recognition from her peers in the nursing profession for her substantial knowledge and contributions to the field.

She was recently selected for a Leadership Excellence Award by the Virginia Nurses in recognition of her leadership and service to the nursing profession in the Commonwealth of Virginia.

In addition, Dr. Hahn was elected a Fellow and Distinguished Scholar of the National Academies of Practice, an interprofessional group of health care practitioners and scholars dedicated to supporting affordable, accessible, and coordinated quality health for all.

"I am dedicated to nursing and the provision of quality and compassionate health care, and it is my honor to serve the nursing profession and Virginia," she says. [GW](#)



Graduate School Boot Camp Team Wins STTI Award

GW School of Nursing's Graduate School Boot Camp Project Team was presented with 2013 Sigma Theta Tau International's (STTI) Education Technology Award.

"We are very proud the Graduate School Boot Camp was selected to receive the Educational Technology Award from Sigma Theta Tau International," says Associate Dean for Graduate Studies Christine Pintz, who led the project team. The team, which also included Laurie Posey, EdD, as director of instructional design, Laurie Lyons, MFA, as instructional designer, and Karin Hannah, BFA, as multimedia designer, worked for three years to create the boot camp, a

comprehensive effort to prepare students for the rigors of graduate school.

"The boot camp helps graduate students transition to the expectations of graduate study," says Dr. Pintz. "More than 300 students have used the program to prepare themselves for the SON graduate program and have rated the boot camp highly."

"Many of our online students are adults, many of whom may be returning to school," says Dr. Posey. "The boot camp goes beyond the typical student orientation by providing refresher education related to foundational academic skills needed for success."

In granting the Education Technology Award to the team, STTI lauded the boot camp as "unique and innovative" in enhancing the learning experience for nursing students.

A grant from the Department of Health and Human Services (HHS) Health Resources and Services Administration (HRSA) allowed the team to undertake the project. [GW](#)

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ALUMNI NEWS

A Strong Start

While Brittany Key, RN, BSN, was not committed to picking universities that go by the name of “George,” she did happen to attend two of them. Originally from Whitehall, IL, Ms. Key came to the DC area to study at George Mason University in Fairfax, VA. After graduating with a degree in psychology, she decided to continue on at the George Washington University’s School of Nursing to obtain her Bachelor of Science in Nursing (BSN).

“I decided on GW because I liked the environment—the way it felt on the Virginia campus,” says Ms. Key. “But I was particularly interested in the school because of its Simulation Lab.”

According to Ms. Key, a 2012 graduate, she learned that “you have to do something at least seven times before you grasp it.” There is no room for error in patient care. “The Sim Lab allows student nurses to make mistakes as many times as needed before getting techniques and protocols right.”

Ms. Key, for example, recalls the initial difficulties she had with the sterile technique of inserting a Foley catheter into female patients. But after multiple attempts in the Skills and Simulation Laboratory, she was able to do it seamlessly. “Now that I’m working at a hospital, I don’t have a problem with it. I never break my sterile technique.”

Ms. Key participated in the accelerated, 15-month program, and during that



time formed a bond with her fellow BSN students. Several of them joined forces to collect food and clothing for a community in Gloucester, VA, that was devastated by a tornado. They even took a day off to drive down to the site and spend time clearing out debris and personal items from a home that had been destroyed.

“We helped each other,” Ms. Key says of her classmates. “The program was rigorous. I could have done it on my own, but sharing the experience with other people helped me do it better.”

The rigorous nature of the program paid off. Ms. Key reports that she was well prepared to take (and pass) the NCLEX exam to receive her nursing licensure. “What I found among GW graduates is that our training taught us to think critically and to be well versed in the skills required to be

an excellent nurse.”

Ms. Key obtained her first job after graduation as a nurse at the George Washington University Hospital in the Intensive Care Unit, a position she currently holds. It was there that she was able to appreciate how solid her nursing education was. “I was able to jump right into the ICU—no problem,” she says.

Ms. Key was recently promoted to team leader in the Intensive Care Unit and will be involved in growing the unit from a 40- to 56-bed facility. She is also being trained to take on the role of charge nurse and to care for patients who have had open-heart surgery. Reflecting upon her time at the School of Nursing, Ms. Key firmly believes that her GW education played a strong role in helping her launch such a promising career. [GW](#)



Aasiya Mansuri, BSN '12, and husband, Pete Leddy, MA '03, in Jordan.

Nursing Around the Globe

Aasiya Mansuri, RN, BSN '12, was caring for patients long before she attended her first class at the GW School of Nursing (SON).

When she moved to Washington, DC, in 2007, Ms. Mansuri landed a job at the Alexandria Detoxification Center, working closely with clients who were dealing with chronic mental, physical, and substance abuse issues—and she was good at it. She

learned quickly how to assess the client’s current state and prescribe a first course of action for getting him or her into treatment.

A degree in nursing from the George Washington University seemed like a logical next step. Ms. Mansuri wanted to attend a local school, so she explored her options and decided to attend SON. It didn’t hurt

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ALUMNI NEWS

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that her husband, Pete Leddy, ESIA MA '03, had gone to GW, too.

"I wanted to get my degree in a shorter period of time," says Ms. Mansuri. "GW enabled me to do that. My husband travels, so I needed a career that would allow me to practice abroad. And it was kind of nice to keep it all in the family."

Shortly after earning her BSN, Ms. Mansuri found out just how portable her nursing career would be. In April of last year, she and her husband spent six months in Jordan. There, Ms. Mansuri was a volunteer nurse and interned with the Jordan Red Crescent, Doctors without Borders (Médecins Sans Frontières), and United Nations Relief and Works Agency (UNRWA) where she took care of patients in orthopedic surgical units, many of whom were suffering from post-war injuries. Ms. Mansuri also helped coordinate medical relief services for Syrian refugees. "Pete and I first started dating when we lived in Damascus. We love the Syrian people!"

Now back in DC, Ms. Mansuri recently

started working at MedStar Washington Hospital Center in the advanced heart failure/cardiac intermediate care unit. According to Ms. Mansuri, her nursing education at SON taught her how to think critically, a habit she is putting into practice every day on the job.

"At the GW School of Nursing, the faculty was always encouraging students to think critically and to advocate for our patients," says Ms. Mansuri. "Patients are looking to you for help. Sometimes, you need to figure out what they need fast. A lab result might be incorrect; there might be a demeanor change in the patient or a marked decline. Someone has to be on the lookout for this and know when to bring it to the physician's attention."

Ms. Mansuri says she constantly finds herself drawing on her SON training. Her most influential instructor and now mentor is Dr. Kristin Caulfield, who provided support and guidance throughout Ms. Mansuri's studies in nursing school. Dr. Caulfield was also her first clinical instructor at Fairfax Nursing Center.

Another instructor, Rebecca Mance, MSN, RNC-OB, made a tremendous impact on her, says Ms. Mansuri. In the early days of her clinical experience, Ms. Mansuri was assigned to work on the maternity ward at Reston Hospital in Virginia. She felt unsure of how to work with pregnant women—and babies.

"Ms. Mance had a passion for pregnant mothers and babies that was infectious," Ms. Mansuri says. "This made me want to learn how to be that way, too. I saw through her eyes how pregnant women are both vulnerable and resilient at the same time. Ms. Mance shaped how I feel about working in obstetrics in general."

Ms. Mansuri recently became a mother herself. And along with her husband, Pete, another GW alumnus was by her side—Michelle Clausen, BSN '12, one of Ms. Mansuri's nursing classmates—who is currently enrolled in SON's MSN Nurse-Midwifery program—assisted with the birth of her healthy baby girl. [GW](#)

A Prize-Winning Grad

Every May, the School of Nursing in partnership with the George Washington Alumni Association (GWAA) presents one nursing graduate with the GWAA Prize. The coveted award recognizes a student who has shown exceptional commitment to GW and its community. The most recent recipient was Kirsten McAlister, an Accelerated BSN student who completed the program in December 2013.

"The GWAA Prize is symbolic of what drove my pursuit of nursing as a second career, and of why I chose to attend the George Washington University," says Ms. McAlister. "GW invests in its students through a realistic and up-to-date learning environment with high-tech simulation labs and community learning, and they have gone above and beyond to invest in me as an alumna with the GWAA Prize."

Ms. McAlister graciously and effectively explored multiple opportunities to improve student experiences within the School of



Nursing, as well as the National Student Nurses Association. At GW, she served as president of the Student Nurses Association and successfully reinvigorated support for the organization within the school. Under her leadership, the association blossomed into a great representational group for the Accelerated BSN students.

The importance of connecting students and alumni is always forefront in Ms. McAlister's mind. She was both a Colonial Mentor to her classmates and

an active planner of SON student-alumni engagement opportunities. Today, Ms. McAlister is a telemetry nurse resident at Advocate Illinois Masonic Medical Center in Chicago.

"This will allow me to continue my service to the Colonial community through the GW Alumni Association in Chicago and to take on learning opportunities for continuing education in my nursing career," she says. [GW](#)

PHILANTHROPY UPDATE



Making History

SON Embarks on \$8 Million Fundraising Campaign

Nurses are the nation's most trusted professionals, playing a vital role at some of humanity's most profound moments—from the beginning of life to its end. Caring and compassionate, they accompany individuals through painful, intimate moments without passing judgment and are the professionals relied upon most frequently to help guide patient decisions.

In an increasingly complex health care arena, nurses must understand the science of disease and treatment and how to manage complex technology. The capacity of nurses to perform successfully is greatly influenced by the education they receive. The George Washington University

School of Nursing (SON) is championing a new model of nursing education, one that acknowledges nurses' essential role in strengthening the health care system.

"Nursing is at an exciting yet critical intersection," says Dean Jean Johnson. "Changes across America in the next 10 years will demand nurses who deliver the highest levels of clinical care, who take an active role in redefining health care, and who serve on the frontlines in shifting patient care from treatment to prevention."

Philanthropy will play a key role in providing the resources that SON programs, faculty, and students need for success. SON, therefore, recently launched an ambitious effort to raise \$8 million for student scholarships, new programs, international partnerships, and enhanced technology and equipment. The school's fundraising plan is part of GW's comprehensive \$1 billion campaign—*Making History: The Campaign for GW*—which publicly launched in June 2014.

Financial aid is vital to attracting top students who, with a GW education, will make a difference. SON needs funds to support students across all programs: Bachelor of Science in Nursing (BSN), Master of Science in Nursing (MSN), and Doctor of Nursing practice (DNP). Philanthropic scholarships through the university's Power & Promise fund are a long-term investment to benefit not just GW students, but also future patients who will receive care from GW-educated nurses.

Scholarships will also support the GW Veterans to BSN program that is being developed to enable military personnel trained as medics and independent corpsmen to apply their experiences to new careers as nursing professionals. The program marries nursing's demand for qualified professionals with the pool of skilled veterans returning from service.

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SON is evolving as *the* school of nursing for health policy by conducting sponsored health policy research and projects, implementing a core health policy curriculum across the BSN-MSN-DNP continuum, publishing in various journals, and being tapped as experts for policy issue panels, committee service, and special projects. In addition, SON is engaging with colleagues in the Milken Institute School of Public Health and the GW School of Medicine and Health Sciences on an interprofessional health workforce initiative.

Another campaign priority is international experiences, which are crucial as global health conversations move from policy to practice. SON faculty and graduates need to be on the frontline of these discussions, with hands-on experience

to back them up. Last year, SON faculty and students participated in programs and partnerships in Haiti, Ecuador, Japan, Singapore, and Thailand. Next year there will be expanded opportunities for continuous care in Haiti, working closely with local business and government to support economic development and health care in the impoverished nation.

Finally, nurses now in training will see unimaginable changes to their field over the course of their careers. This brings a corresponding rise in technology that will monitor and report such things as a patient's blood pressure or asthma condition. It also puts new demands on nurses as they connect with people before chronic diseases develop. Philanthropy will support lab space and technology, such as the sophisticated human-like simulators that

train GW nurses on everything from routine patient assessments to recognizing and responding to acute conditions.

"This campaign is essential to our success," Dean Johnson says. "Meeting our goals will vastly increase our capacity for good and amplify our voice at this crucial time in US health care. Any gift will have an immediate impact on nursing and, through the years, on hundreds of thousands of patients." [GW](#)

FOR MORE INFORMATION on how to contribute to the campaign, please contact Erin Harkins-Medina, associate director of development, at ehmedina@gwu.edu or [202-994-7119](tel:202-994-7119). Stories of the campaign's impact can be found at campaign.gwu.edu.

DNP Takes Career to New Levels

At the age of 42, Col. Richard Prior, DNP, FNP-BC, FAANP, having already obtained an MSN from the Uniformed Services University of the Health Sciences in Bethesda, MD, decided he wanted to further his education by obtaining a doctor of Nursing Practice (DNP) degree. Given the limited number of schools in the country at that time offering the degree, he quickly zeroed in on George Washington's nursing program.

"I'm from Ohio, so I gave serious consideration to Ohio University," says Col. Prior. "But I was living in the DC area at the time, and what attracted me to GW was that it offered the entire program online—no sitting in traffic!"

Col. Prior was also enthusiastic about attending a university with a national reputation, and one that resided in the nation's capital. "It was a pretty big deal for me," he says. "I was 11 or 12 when Reagan got shot—which had a big impact on me—and I thought about that as I walked into the GW Hospital so many years later. Plus, my

son and I enjoyed following the basketball games."

A "career army guy," Col. Prior was a family nurse practitioner when he began his studies at GW. He found the nursing faculty extremely helpful and supportive of the online students. If time did not allow for a trip to the campus, professors were happy to set up appointments by phone. According to Col. Prior, the online model worked quite well for his degree program and enabled him to acquire the skills he needed.

Enjoying the perspective of international students was an added benefit of being part of the program. "I really liked the online discussions," he says. "For instance, I remember one student from Canada talking about what [the health care system] was like in Canada shortly after the Affordable Care Act was enacted. It was pretty interesting."

Col. Prior brought with him a wealth of real-world nursing practice from his longstanding military nursing career, and upon completing the DNP program at the GW School of Nursing in 2012, he was assigned the position of deputy commander for nursing and clinical services at the Kenner Army Health Clinic in Fort Lee, VA. There, he oversaw the provision of nursing and ancillary services for 32,000 beneficiaries, led a 180 member staff,



and served as the principal adviser to the commander on policies, procedures, and all matters pertaining to nursing.

In July 2014, Col. Prior transferred to the Ireland Army Community Hospital in Fort Knox, KY, to assume the role of deputy commander for nursing.

Col. Prior's advice to anyone considering the DNP program at SON? "If you are a clinician looking to assume a leadership role as your career matures, it's important that you broaden your skill base. It's critical that you learn how to lead a team in a multidisciplinary environment. The DNP program at GW can help you develop those skills." [GW](#)

Rethinking Health Care's Bottom Line

With his company Avēsis, SON Advisory Council member Alan Cohn, BA '77, is helping some of the sickest and most expensive patients in the country.

In 1993, the health care company Avēsis Inc. was 60 days away from closing its doors. But Alan Cohn, BA '77, saw an opportunity to open another one.

His group purchased the 35-year-old company and transformed it into a national vision/eye medical surgical, dental, and hearing company that covers more than 7 million members around the United States.

Avēsis provides its plans to more than 7,500 employer groups and approximately 30 commercial, Medicaid, and Medicare health plans nationwide. His company also runs a new program called AbsoluteCARE, a staff model medical center that provides ambulatory ICU care for patients with social/behavioral and co-morbid chronic conditions—a population that accounts for more than half of health care spending in the United States.

An Avēsis subsidiary, AbsoluteCARE offers health care for “the sickest of the sick,” says Mr. Cohn. The patients, referred to AbsoluteCARE by their health care providers and health plans, suffer from

chronic conditions such as diabetes, chronic obstructive pulmonary disease, congestive heart failure, HIV/AIDS, and severe behavioral issues. These individuals have average claims costs of more than \$60,000 a year.

Mr. Cohn says this model of care, aligning the needs of the patient, health care provider, and the payer, not only improves the quality of life but also improves the bottom line. When a patient's health improves, his or her health care costs decline and the cost burden upon other citizens diminishes.

“This is a new model where it's not just fee for service it's a combination of fee for service with a risk component where we have to improve their lives while meeting quality metrics at the same time,” he says. “We act as quarterback—the key is to do right by the patient and coordinate care; then we will see the patient improve and the costs will go down. Besides huge costs savings, the lives that we've been able to improve has been wonderful.”

Patients are provided transportation to AbsoluteCARE's high-quality four-star facilities—currently in Atlanta and Baltimore—and are given access to a range of medical experts, including medical doctors, nurse practitioners, behavioral health practitioners, social workers, laboratory technicians, pharmacists, and registered nurses.

“At AbsoluteCARE, the patient is in the center of the universe, instead of being an inanimate object,” says Mr. Cohn. “So many patients come in and their eyes are glazed over because they are in so much trouble, but after six months you can see they are

getting back to normal again.”

But quality care cannot be provided without access to a highly trained staff of health care professionals, which is one of the reasons Mr. Cohn believes schools like the GW School of Nursing (SON) are vital to the health care industry.

He cited SON's strong faculty, cutting-edge laboratory facilities, and hands-on approach to teaching health care as critical to helping build a strong, national contingency of nurses.

“One of the biggest issues in our country is that there are not enough nursing schools to graduate the number of nurses we need,” he says. “We need nurses in the worst way. The whole approach GW School of Nursing is taking with second-degree programs is so important. They continue to do wonderful work and are graduating nurses who are exceptionally trained to get into doctors' offices and hospitals.”

Mr. Cohn's daughter, Madison Cohn, BSN '11, decided to enroll in the School of Nursing after receiving her undergraduate degree in business elsewhere.

“She did fabulously at GW,” says Mr. Cohn, who is also a member of the SON Dean's Advisory Council. “The nursing program was a terrific experience for my daughter, and she got a great education.”

She is now a registered nurse in an emergency department in Austin, Texas, a job Mr. Cohn says she loves. His other two children are also in health care—his son, Josh, is a vice president at Avēsis; and

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Alan Cohn, BA '77, (left center wearing hat), with some of his fellow alumni including his college roommate US Sen. Mark Warner, BA '77.

PHILANTHROPY UPDATE

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his daughter, Alexis, is an occupational therapist at New York Presbyterian Hospital.

Mr. Cohn has worked in the health care industry for more than 30 years, but it wasn't a career path he had anticipated for himself. After he graduated from GW's Elliott School of International Affairs in 1977, he enrolled in night classes at the University of Baltimore School of Law. During the day, he worked at the US Department of Health and Human Services' Health Care Finance Administration (now called the Centers for Medicare and Medicaid Services), which administers the Medicare and Medicaid programs. His responsibilities included writing administrative review decisions, a process that opened his eyes to the business possibilities in the health care industry.

But Mr. Cohn's decision to enroll at the George Washington University was not as circuitous. He had visited other schools in the area, but when he stepped on GW's Foggy Bottom Campus he immediately felt comfortable.

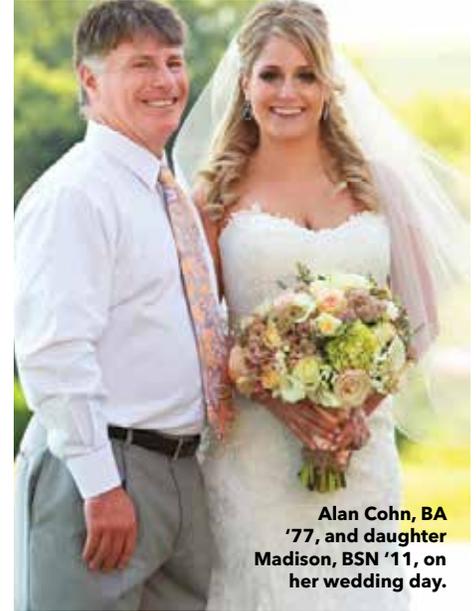
"I liked the university's philosophy and the student body I saw, and the whole

atmosphere felt right," he says. "It's a feeling—I couldn't put my finger on it at the time, but it felt right to be in the District."

At GW, Mr. Cohn was challenged both academically and socially. During his freshman year, he joined the GW Program Board—then the university's de facto student government—and eventually became its chairman. He met people who became lifelong friends, including his old roommate US Sen. Mark Warner, BA '77. Mr. Cohn also took advantage of GW's proximity to the federal government as an intern for former California Sen. John Tunney.

"There were all types of activities available at GW, and they were wonderful," he says. "I became close with a group of 15 guys, and we still get together once a year in DC to play basketball and hang out. It's wonderful—those are relationships I really value. It's one of the greatest legacies of GW for me."

He gives back to GW every year to support innovative health care programs, and so that others are afforded the same positive experiences he had while on campus. His gifts to SON's efforts in Haiti and to student scholarships align with both his personal interests and the school's priorities.



Alan Cohn, BA '77, and daughter Madison, BSN '11, on her wedding day.

"The initial life experiences I had at GW were so wonderful for me," he says. "My education provided me such a great foundation to move into business and to look at health care from a public policy perspective. GW is a great institution and the little bit I've been able to give back is the right thing to do—and it makes me feel good!" [GW](#)

Serving GW and the DC Community

It was a trip to East Africa that made Betsy Linsert, NP '98, recognize that she was in the wrong profession. Living as a young professional in the Washington, DC, area and as a regular "Girl Friday" on Capitol Hill, Ms. Linsert was so moved by her travels that she made up her mind to change her career path and become a nurse.

"I decided I wanted to do something I could love all the time," she says. She went on to earn a master's degree from the Graduate School of Nursing in New York, but it wasn't until she completed her coursework in the GW Nurse Practitioner (NP) program many years later that she felt she had the skills she needed to best serve the needs of her patients. "What I loved

most about going through GW's program is that it expanded my knowledge of what it means to be a professional nurse."

Her favorite course of study was pathophysiology. She was fascinated by the conditions required for a diseased state to develop within the body.

According to Ms. Linsert, she chose the GW nursing program when a reference to the opportunity showed up in a newspaper. "GW was in the neighborhood and exactly what I wanted. It kind of fell into my lap and I said to myself 'I should not ignore this.'" Her time spent in the NP program turned out to be one of the best years of her life. Her children were in college, and her only responsibility was to do well in school. "All I had to do was go to class and study. I love to study, and I loved the topic."

Ms. Linsert's dedication to GW and serving the community did not end when she got her degree. She currently works part time at the GW Student Health Service. She also volunteers at Bread for the City, an

organization that provides food, clothing, medical care, and legal and social services to the more vulnerable residents of the nation's capital.

"I find myself working with patients at both ends of the spectrum," says Ms. Linsert. "At Student Health Service, most of the people I work with are young and in reasonably good health. At Bread for the City, they tend to be more mature individuals, suffering from a variety of serious health problems."

Over the years, Ms. Linsert has generously contributed to SON. "In the GW School of Nursing, they teach you to listen to the patient and that physical ailments are only part of the picture. They instilled in us that if a patient was suffering physically, he or she was suffering emotionally as well." These are values that Ms. Linsert would like to see more of throughout the nursing community, which is why she is such a strong advocate of the GW School of Nursing. [GW](#)

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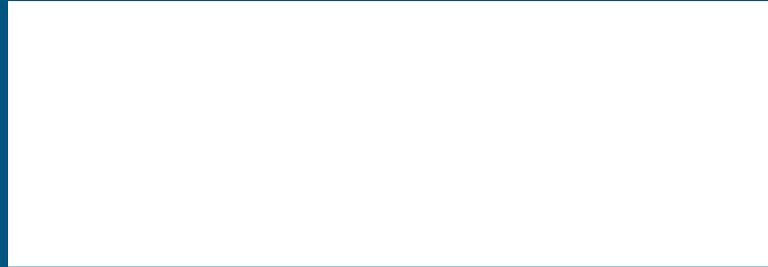
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