

FALL 2013

vanderbiltnurse

Fast
Forward:

Dean Linda Norman



“The scholarship is a wonderful gift. Knowing there are people who are helping us accomplish our dreams as nurses—that is really powerful.”

—Trinity Hochstetler
Class of 2014



PHOTO BY VANDERBILT CREATIVE SERVICES

Trinity Hochstetler knows in nursing some things are timeless—a passion for service, caring for children in need, advances in technology. Hochstetler receives support from the Imogene “Gene” White Bottorff Scholarship, established in honor of a School of Nursing graduate from 1945.

“Nursing is the ideal way for me to combine my background in biochemistry with my goal to help children from underprivileged communities,” says Hochstetler, who is studying to become a pediatric primary care nurse practitioner. “I’ve been so inspired by the faculty here who integrate their commitment to service into their careers.”

Scholarships link generations of Vanderbilt nursing students who are motivated to make a healing difference.

If you’d like to support dedicated nursing students like Trinity through scholarship endowment, please contact Sydney Haffkine at (615) 322-8851 or sydney.haffkine@vanderbilt.edu to learn more.

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SCHOOL OF NURSING
VANDERBILT UNIVERSITY

MISSION AND VALUES
STATEMENT

We value excellence and innovation in preserving and advancing the art and science of nursing in the scholarly domains of education, research, practice and informatics. These values are pursued through the integration of information technology and faculty-student interactions and transactions, while embracing cultural and academic diversity.



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FALL 2013 CONTENTS

features

8 Fast Forward: Dean Linda Norman

Nicknamed the “Energizer bunny” by those who know her best, Linda Norman’s combination of experience and leadership style make her an ideal leader for this time in the School’s history.

14 Nursing Without Borders

The School of Nursing’s reach is far and wide thanks to student-driven interest that spans the globe.

22 Doctor of Nursing Practice Program

Take a closer look at one of the most popular programs in nursing education today—Vanderbilt style.

Fast Forward 8

In July Linda Norman became the eighth dean of the Vanderbilt School of Nursing.

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departments

2 Message from the Dean

Dean Norman shares insights into her first 100 days on the job.

4 News around the school

Research, outreach and initiatives from the School of Nursing and Vanderbilt University Medical Center

7 Research news

Deonni Stoldorf, Veterans Administration Quality Scholar, shares her perspective of nursing innovation and sustainability.

26 Class notes

Promotions, personal achievements, moves, marriages, babies and the latest news from classmates

29 Photo gallery

Enjoy photos from Graduation 2013



Dear Alumni, Colleagues and Supporters,

It is an honor to serve as dean of the Vanderbilt University School of Nursing, and I will work every day to live up to the challenge. As you probably know, there is no better learning or proving ground than having worked with Dean Emerita Colleen Conway-Welch for more than 20 years. Yet, I am learning things every day in my new role.

So what have I learned in the first 100 days?

Health care is going through a pivotal time. We know that health care is constantly evolving, but what is happening lately is a fundamental shift. Like so many academic medical centers throughout the country, Vanderbilt University Medical Center has been forced to right-size its workforce and make other difficult decisions to improve operational efficiency. During this time, our leaders and colleagues at the Medical Center have reached out to the School of Nursing as never before, being transparent in strategic decisions and turning to us for problem-solving support.

The School of Nursing is very highly respected not only nationally, but in our own backyard. Vanderbilt views us as being an extremely financially responsible and well-run area. We are seen as an innovator in course delivery, using blended distance learning methods, creative clinical simulations, and interactive classroom processes. I meet with Marilyn Dubree, executive chief

nursing officer and VUSN '76 alumna, on a regular basis and together we are identifying opportunities where clinical nurses, VUSN students and VUSN faculty can work more closely together to enhance learning for all involved.

We have been on a tremendous growth trajectory these last 10 years, in terms of number of students, programs and specialties. Now is the ideal time to really examine what we do next. There are pockets of partnership in research, practice and educational programs between the School of Nursing and other entities throughout Vanderbilt. It's time to collaborate and synergize in new and profound ways throughout the campus including all areas from engineering to arts and sciences.

Our campus is touted as being in a park-style setting. The enormous magnolia trees are so tall and plush that they often obstruct the views of School of Nursing buildings. My goal is for the image of VUSN to figuratively emerge above those magnolias through our partnerships with the other schools and areas of the Medical Center. Reaching out is the way for us to grow even stronger.

Sincerely,



Linda Norman, DSN, RN, FAAN
 Valere Potter Menefee Professor of Nursing
 Dean of the Vanderbilt University School of Nursing
linda.norman@vanderbilt.edu



IMAGEZOO ILLUSTRATION/VEER



Murley named Assistant Dean for Educational Informatics

Jerry Murley, MEd, was named assistant dean for Educational Informatics at Vanderbilt University School of Nursing. In his new role, he is responsible for operationalizing new educational informatics ideas, serving as the School's representative to technology support groups at Vanderbilt and helping solve educational challenges through technology.

"Much of the School's technological advancements and success are due to Jerry's tenacity and persistence," said Betsy Weiner, PhD, RN, senior associate dean of Informatics. "He never forgets that technology is meant to help students enrich their education."

Murley has been a member of the School of Nursing faculty for nearly 20 years, involved in many of the School's technological advancements and learning innovations. He joined VUSN as director of the Helene Fuld Instructional Media Center in 1994.

Working with a talented support team, he has helped advance the distance learning efforts, database management, and Web-based testing, evaluation and communications systems at the school. He has managed a team of Web programmers and videographers who have delivered instructional content to enrolled students on a daily basis since 1996. His video team recently developed one of Vanderbilt University's pilot Coursera courses.

New Study: Communication Among Providers

Primary care physicians and nurse practitioners significantly disagree on some proposed changes to the scope of nurse practitioners' responsibilities, according to a *New England Journal of Medicine* study released this summer.

The study, led by investigators from the Vanderbilt University School of Nursing (VUSN), Vanderbilt Institute for Medicine and Public Health and Massachusetts General Hospital (MGH), comes at a time when the U.S. health system is facing both an increasing demand for primary care services and a worsening shortage of primary care physicians.

One broadly recommended strategy to combat the problem has been to increase the number and the responsibilities of nurse practitioners.

"It is unsettling that primary care physicians and nurse practitioners, who have been practicing together for several decades, seem so far apart in their perceptions of each other's contributions," said co-author Peter Buerhaus, PhD, RN, director of the Center for Interdisciplinary Health Workforce Studies and the Valere Potter Professor of Nursing at VUSN.

The study survey was mailed to a national random sample of nearly 2,000 primary care clinicians—evenly divided between physicians and nurse practitioners—and responses were received from 467 nurse practitioners and 505 physicians.

The majority of both groups—96 percent of nurse practitioners and 76 percent of physicians—agreed with the Institute of Medicine recommendation that nurse practitioners "be able to practice to the full extent of their education and training."

The two groups disagreed significantly on whether an increase in the supply of nurse practitioners would improve patient safety and the effectiveness of care and health costs. One-third of physicians responded that such an increase might have a negative effect on safety and effectiveness.

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“We were surprised by the level of disagreement reported between these two groups of professionals,” said Karen Donelan, ScD, EdM, of the Mongan Institute for Health at MGH, lead author of the report.

“We had hypothesized that since primary care physicians and nurse practitioners had been working together for many years, collaboration would lead to more common views about their roles in clinical practice. The data reveal disagreements about fundamental questions of professional roles that need to be resolved for teams to function effectively,” she said.

A strong majority (82 percent) of nurse practitioners believed they should be able to lead medical homes—practices using a team-based model to deliver coordinated patient care—but only 17 percent of physicians agreed.

Additionally, 64 percent of nurse practitioners agreed they should be paid equally for providing the same services, compared with only 4 percent of physicians.

Sixty percent of nurse practitioners in collaborative practices indicated they provided services to complex patients with multiple conditions, but only 23 percent of physicians in such practices responded

“The data reveal disagreements about fundamental questions ... that need to be resolved for teams to function effectively,” said Donelan.

that those services were provided by nurse practitioners.

Study co-author Robert Dittus, MD, MPH, Albert and Bernard Werthan Professor of Medicine, associate vice-chancellor for Public Health and Health Care and director of the Institute for Medicine and Public Health, said he hopes the study will provide information needed for thoughtful discussion among nurse practitioners and physicians and encourage a

focus on working more closely together in both training and practice to understand each provider’s capabilities and roles.

The study was supported by grants from the Gordon and Betty Moore Foundation, the Johnson & Johnson Campaign for Nursing’s Future, and the Robert Wood Johnson Foundation.

Travis Estate Donates Significant Gift to Vanderbilt University Medical Center



The estate of Hilliard and Nancy Travis has provided a generous gift to Vanderbilt University Medical Center, specifically supporting student scholarships for the Vanderbilt University School of Nursing and ongoing research at the Monroe Carell Jr. Children’s Hospital at Vanderbilt, both areas designated by the Traveses themselves.

“Mr. and Mrs. Travis have left an indelible mark on Vanderbilt and on Nashville, continually giving of their time and financial support throughout their lives and now as part of their legacy,” said Jeff Balsler, M.D., Ph.D., vice chancellor for Health Affairs and dean of the Vanderbilt University School of Medicine. “Lasting results of their generosity will provide for two

noble missions; to train nursing leaders and to provide the funds necessary for our researchers to unravel the mysteries surrounding serious childhood diseases.”

The impact of the Traveses’ prior gifts to Vanderbilt includes providing scholarships for 447 nursing students, bringing happiness and hope to the lives of children treated at Vanderbilt and endowing the Nancy and Hilliard Travis Chair in Nursing, held by Colleen Conway-Welch, Ph.D., C.N.M., School of Nursing Dean Emerita.

The gift gives permanence to their legacy and dedication to Vanderbilt, and provides a significant boost to scholarship support and research in children’s health, impacting students, patients,

families and society on a global level.

Hilliard Travis was co-founder/co-owner of Nashville-based Travis Electric and the East Tennessee franchisee of Shoney’s Restaurants. Nancy Travis was a 1947 graduate of the Vanderbilt University School of Nursing and was part of the Cadet Nurse Corps that was preparing nurses to assist with those wounded during World War II. She served in various nursing capacities in Nashville, including at the Florence Crittendon Home. Hilliard Travis died in 1996, and Nancy Travis died in July 2012.



For more information, visit our website at news.vanderbilt.edu

New Program Directors



Registered Nurse – PreSpecialty Director

Sarah Fogel, PhD, MSN, RN, has been named Registered Nurse - PreSpecialty Director. Fogel, professor of

Nursing, has been actively engaged in the program as faculty member and succeeds Carolyn Bess, DSN, MSN, RN, associate professor of Nursing, who helped develop the program and recently retired from the position.

Fogel has been at the School of Nursing for nearly 19 years, working closely with the Registered Nurse - PreSpecialty program for most of that time. She also teaches in the Doctor of Nursing Practice Program and delivers most of the Lesbian/Gay/Bisexual/Transgender content in several different specialty nursing programs.

Her research has focused on information needs of people living with HIV/AIDS, facilitators and barriers of disclosures of sexual identity to health care providers and parish nursing. One of her current areas of work is with the Mautner Project's Obesity Project, part of a nationwide project to implement weight loss/risk reduction interventions for sexual minority women in four cities.



Family Nurse Practitioner

Geri Reeves, PhD, RN, has been named program director for the Family Nurse Practitioner Program.

Reeves, assistant professor of Nursing, is a board-certified family nurse practitioner and an experienced nurse educator. She joined the faculty in 1996 in a joint practice and academic role. During that time, she has taught in the family nurse practitioner program while serving the community at Park View Hospital, South Street Family Medical Center and various nurse-managed clinical sites. She practices part-time at the Vanderbilt Williamson County walk-in clinics in Franklin and Spring Hill.

Reeves is active inside and outside the school of Nursing. Her research interests are the impact of depressive symptoms on chronic disease outcomes, and she has authored several articles. Internally, she has played an important role in the school's Doctor of Nursing Practice curriculum.



Health Systems Management Director

Kelly Wolgast, DNP, MSS, RN, FACHE, has been named program director for the Health

Systems Management program. The position was previously held by Bonnie Pilon, DSN, RN, senior associate dean of Faculty and Community Partnerships, who is stepping down to devote more time to her funded grant project for nurse-managed clinics throughout the community.

Wolgast joined VUSN in 2011 as an assistant professor in the Health Systems Management program. Prior to that, she served 26 years in active duty in the U.S. Army and retired as a colonel. During her military career, she earned the Bronze Star for combat experience as Deputy Commander and Chief Nurse in Afghanistan, deployed in support of Hurricane Katrina relief operations in New Orleans, and served as a Hospital Commander. She also served as the Senior Nurse Executive of the U.S. Army Medical Command.

School Gets Loan Forgiveness Grant

Vanderbilt University School of Nursing has received a \$427,499 award from the Nurse Faculty Loan Program (NFLP) grants for 2013-14. This is the 10th consecutive year that VUSN has received the grant from the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA).

The grants are designed to help ease a national shortage of nursing educators. The American Colleges of Nursing's 2012 report concluded that 66 percent of surveyed nursing schools pointed to faculty shortages as a reason for not accepting qualified applicants into baccalaureate programs.

Students who receive loans for master's or doctoral degree programs can have up to 85 percent of the loan forgiven in exchange for service as full-time nursing faculty members at an accredited school of nursing. Students continue to receive funds for the duration of their degree program as long as they maintain good academic standing. The NFLP was approved by Congress in 2002. VUSN's NFLP grants now total more than \$4.6 million.

Schorn Named Senior Associate Dean for Academics

Mavis Schorn, PhD, CNM, has been named senior associate dean for Academics at Vanderbilt University School of Nursing. She has served as assistant dean for Academics for the past three years while maintaining an active clinical practice at West End Women's Health Center.

"Mavis is the ideal person for this position. She is a gifted educator, an effective manager and well respected within the Vanderbilt and health care communities," said Linda Norman, DSN, RN, dean of VUSN and Valere Potter Menefee Professor of Nursing.

Schorn joined the Vanderbilt Nurse-Midwifery faculty in 2002 and became its director in 2006. Under her leadership, the program has grown in prominence, and is ranked by *U.S. News and World Report* among the top three graduate nurse-midwifery programs in the country.

In 2010, she assumed the newly created position of assistant dean for Academics, while continuing to lead the Nurse-Midwifery program and maintaining her clinical practice.

As her role is expanding, Schorn has focused primarily on regulatory and compliance issues, systematic program evaluations, global health opportunities and other school-wide academic needs. She has held national leadership roles in the American College of Nurse-Midwives, and is recognized for her research on pregnancy, specifically the third stage of labor.

Schorn earned her baccalaureate in Nursing from the University of Texas, Austin; a Master of Science from Texas Woman's University, Houston; a Nurse-Midwifery certificate from Baylor College of Medicine, Houston; and a Ph.D. from the University of Kentucky, Lexington.

She was inducted into the fellowship of the American College of Nurse-Midwives in 2011, has consistently received clinical practice awards for meeting national satisfaction benchmarks, and was named the Tennessee March of Dimes Nurse of the Year for Education in 2010.



DNP Program Earns Accreditation

The Vanderbilt University School of Nursing's Doctor of Nursing Practice program has been awarded initial accreditation from the American Commission for Education in Nursing (ACEN) for five years, through Spring 2018. This comes after a yearlong self-study and site visit process.

"This is tremendous news for the school, our faculty and most importantly, our students," said Linda Norman, DSN, RN, dean of the Vanderbilt School of Nursing and Valere Potter Menefee Professor of Nursing. "This was a rigorous process, and we passed with flying colors thanks to the dedication of our faculty and staff who are continually looking for ways to deliver the best possible education to our students."

In the review process, the ACEN pointed out several of VUSN's strengths, including fiscal management to support new initiatives, faculty skill in integrating technology into teaching strategies that enrich the online learning experiences, and strong administrative and informatics technology support staff.

VUSN launched its DNP program in fall 2008. Since then, 144 students have graduated from this program.



For more information about the DNP Program, visit our website at nursing.vanderbilt.edu/dnp/

ANNE RAYNER



Four-year-old Adrian Titington gets a checkup from VUSN Assistant Professor and Family Nurse Practitioner Roberta Bradley with help from VUSN student Neesha Shah Hetcher.

VUSN Helps Children Get Ready for School

Thanks to VUSN faculty, students and volunteers, 55 elementary school children received physicals and immunization counseling so they could start public school this year as part of a concentrated outreach effort by The Clinic at Mercury Courts. These children live in an underserved area of inner city Nashville. Without access to this health fair, many of these students would likely have not been able to start the school year on the first day, and would have missed important instructional time.

Spotlight on Nursing Research//Rapid Response Team Sustainability

JOHN RUSSELL



Incoming Veterans Administration Quality Scholar Deonni Stollendorf, PhD, MSN, RN, is passionate about innovation in health care.

She's been interested in medicine since she was a child growing up in South Africa. She was a high achiever with good grades who applied to medical school at a time when very few women were admitted, and, because of gender bias, was denied access entry. Dedicated to making a meaningful contribution in health care, she pursued her education in nursing.

A few years later when she was finally admitted into medical school, Stollendorf chose instead to continue her commitment to a career in nursing. She had heard that nurses in the United States were held in higher esteem than those in South Africa, so she began looking for opportunities to go abroad. In 1997, a travel nurse company sponsored her to take the NCLEX exam, and if she passed, contractually bound her to sign on for 18 months. She passed the NCLEX and reported to her first assignment in Sacramento, Calif., and after that, crossed the country on various assignments.

For the past 13 years, Stollendorf has worked in the Durham-Chapel Hill, N.C.,

area, most recently serving as a staff development specialist for a regional hospital system.

With her depth and breadth of nursing experience, Stollendorf is all too familiar with the tendency for hospital systems to churn out new initiatives with the promise of greater efficiency and higher value. She has seen too many of these well-meaning innovations start with a splash of excitement and support only to quickly fade into obscurity. She's interested in innovations with staying power—those that can become embedded in the culture of nursing care delivery. And so she chose to study rapid response teams in hospital systems.

Rapid response teams were introduced in 2004 by the Institute for Healthcare Improvement. Many thought this approach of medical “SWAT teams,” to bypass the typical chain of command and intervene to provide lifesaving care, would have been adopted by a majority of hospitals by now. But that has not been the case.

“Rapid response is a little controversial because there are those who feel it is making a difference and others who don't. Some studies show improvement in inpatient mortality rates following rapid

response team implementation. Others don't. There is a lot of anecdotal information about nurse satisfaction and nurse retention rates improving, but not any large scale studies to determine if rapid response teams really improve these outcomes,” said Stollendorf.

That's why she dedicated her dissertation to sustainable innovations in hospitals, particularly delving into rapid response teams. Her research is based on a two-phased approach using quantitative and qualitative methods. In the first phase, she surveyed hospitals in the Southeast and the sustainability of their rapid response programs. Phase Two was a multiple case study approach that examined two hospitals with the strongest sustainability scores and compared them to two with the weakest numbers.

“I wanted to see when we implement something, how we actually get the benefits. What factors are barriers and facilitators to the sustainability of programs that were implemented with the goal to improve quality of care? In the case of rapid response teams, the lack of innovation sustainability may directly impact timeliness of care and patient safety,” said Stollendorf. “And, with the rising costs of health care, we have to use all of our resources judiciously.”

She did not anticipate similarities in sustainability factors between hospitals with high sustainability scores and those with low scores. The context of the work environment and work processes would ultimately determine high vs. low levels of the sustainability of the rapid response teams.

“I was surprised to see the degrees to which rapid response teams were embraced or not embraced in different hospital systems,” said Stollendorf. “We found that team members played a significant role in accepting this approach and that physician buy-in was crucial. The conclusion was that rapid response teams are not yet sustained as we'd like to see.”

— KATHY RIVERS



Fast Forward:

Dean Linda Norman

When she was just 9 years old, Linda Norman knew that she wanted to become a nurse and a teacher. She just didn't know how far she would go.

Parents Harold and Becky Boggs told Linda at a young age that she was adopted. They wanted her to know how wanted she was. As an only child, Becky made sure Linda had just enough, but not too many, things. She didn't want her to be spoiled. Community service was embedded throughout her formative years, including weekly visits to a local orphanage where Linda loved playing with the other children.

After earning her bachelor's degree in Nursing at the University of Virginia (UVA), she started out as a staff nurse on a neurosurgical unit at UVA and was later drawn to nursing education. Her interest in research began early in the first year of her nursing career as she served as a research assistant to Phyllis Verhonick's nursing research grant on decubitus ulcers. She completed her Master of the Science of Nursing at UVA and a doctorate in the Science of Nursing at the University of Alabama at Birmingham. For more than 20 years, she has led several curriculum innovations at Vanderbilt, working beside her predecessor Colleen Conway-Welch, who retired as dean this year.

This summer Norman, DSN, RN, Valere Potter Menefee Professor of Nursing, officially became the eighth dean of the Vanderbilt University School of Nursing in the school's 105-year history, a position she never thought would be vacated during her time at Vanderbilt.

"Colleen built a lasting legacy, and Linda is the ideal person to lead the School of Nursing forward. She personifies the school's mission of education, research and practice in everything she does. She's highly regarded throughout the world of nursing and health care. Throughout Vanderbilt she's known as a bridge-builder, a team player and someone with solutions," said Jeff Balser, MD, PhD, vice chancellor for Health Affairs and dean of the Vanderbilt University School of Medicine.

With a work ethic so strong that colleagues and friends describe her as the "Energizer bunny," Norman has a strong vision for the school's future. She's already gotten started.

BY KATHY RIVERS

PHOTOGRAPH BY DANIEL DUBOIS

Interprofessional Learning

The top item on the agenda, according to Norman, is increasing partnerships between VUSN and other parts of the University and Medical Center.

That is something that Bonnie Miller, MD, knows a lot about. Miller, senior associate dean for Health Sciences Education at Vanderbilt's School of Medicine, and Norman have been working together for several years on interprofessional learning between nursing and medical students. Most recently, they have co-led the Vanderbilt Program of Interprofessional Learning (VPIL) where medical and nursing students from Vanderbilt learn alongside students from Tennessee State University's social work program and the Belmont University and Lipscomb University pharmacy schools.

"Linda thinks about the way things can be, as well as the way things are. She has a vision for interprofessional collaborative practice that really is a vision for the future," said Miller. "It's easy to lose focus on what we are trying to do and who really hires us to do our jobs in health care. We are hired by the public and patients to fill their needs, and Linda really gets that."

VPIL is currently focused with a small number of students from each profession. Lack of clinical sites has been a barrier to expansion, but the overriding goal is to determine the long-term impact of learning in an interprofessional team and what other interprofessional activities would enrich the process.

"We are teaching our students skills and competencies of working together as health team members, and at the same time trying to understand how our students can function as change agents," said Miller.

Norman says increasing partnerships means more than the success of VPIL. For instance, the School of Nursing is exploring partnerships with Vanderbilt's Peabody campus about programs related to pediatric obesity. Students will fill an important need of educating members of the community, while gaining some valuable hands-on experience as part of their

nursing education. The same goes for the Mobile Market project, an outreach effort started at Vanderbilt, which offers low-income inner city residents access to fair-priced fresh fruits and vegetables.

The school is also working with the Vanderbilt Heart and Vascular Institute (VHVI) in how they are teaching community health concepts. Students provide additional support to the VHVI health care team, and provide telephonic and home visits for at-risk patients recently discharged from VUMC with congestive heart failure. Students learn about the interaction of the community, the needs of the patients, and the intricacies of the health care system in a different way, while helping the Medical Center further decrease its less than 30-day readmission rates, a key metric for hospitals as health reform comes into practice.

"We want to increase the opportunities for interprofessional (learning) across multiple entities, not just nursing and medicine," Norman said. She and Emily Townes, the new dean of the Divinity School, have already started conversations to expand collaboration between the two schools. As we do that, we're going to enhance our education, research and practice," said Norman.

Smart Growth

Norman envisions strategic growth rather than exponential enrollment growth for the next few years.

"When you look at our student enrollment chart from 2003 to 2013, we have doubled the size of the School of Nursing—from 450 to 900 students—including launching our DNP program. Now we need to look at right-sizing and strengthening the integration of teaching, scholarship and practice," she said.

To get an idea of the depth and breadth of the VUSN student body, nearly 300 students received their nursing pins at this summer's Pinning Ceremony, marking completion of their master's coursework. This fall, VUSN faculty and staff welcomed 452 new students pursuing either a

5 Things You Need to Know about Dean Norman

- She ends meetings with: "Does anyone have anything else to share for the good of the School?"
- She has a long history of approaching faculty with: "Do I have an opportunity for you!"
- She has a hearty laugh.
- She has a habit of waking up and working from 2-4 a.m., then going back to bed, though she doesn't expect others to burn the midnight oil.
- She has a dog, a Shih Tzu named Truffles, who her friends call the "luckiest dog in the world."

Master of Science of Nursing, Doctor of Nursing Practice or PhD in Nursing Science degree through various entry points and with 12 specialty tracks.

The blended distance learning programs of the MSN degree, where half of coursework is completed face to face with the remainder online and the students visiting the Vanderbilt campus three to four times a semester, are very popular. More than half of all students learn through this format. The DNP and PhD programs offer more flexibility, so students only come to VUSN for an intensive session once per semester. Norman's leadership has been integral in facilitating the faculty in the development and implementation of these innovative types of program delivery methods.

Norman thinks the public understands the vital role nurses play in society and in health care delivery as never before. The nursing industry has matured and become a more integral part of health care delivery. Baccalaureate-prepared, master's-prepared and doctorally-prepared nurses

are now well-known in the community. She feels that the reason that the public is more aware of the contribution of nursing to health care is the enhancements that have been made in nursing education.

“A strong nursing program needs to integrate—not layer on top—things like evidence-based practice, quality improvement, team function and culture competency in everything. It’s not something you can address just in a lecture,” said Norman.

Norman’s approach is in sync with national educational goals.

“Linda’s probably made the strongest name for herself in nursing education in terms of program evaluation,” said Jeanette Lancaster, UVA School of Nursing dean emerita and a colleague of Norman’s for many years. “Most people don’t want to do it, because it’s rigorous, but she has developed a strong expertise in program evaluation including academic program evaluation,” she said.

Lancaster said Norman is well-informed about national and international health issues. “She’s part of a coalition of schools from Australia, Ireland, England and Hong Kong looking at the best ways to teach health policy and has served on many national organizations, including the Robert Wood Johnson Foundation. She stays focused and sticks to key themes,” she said.

The Selection Process

According to Bob Dittus, MD, associate vice chancellor for Public Health and Health Care, Norman is the “ideal fit for where the School is, where society is and where health care is.” And he should know, as chair of the VUSN Dean Search Committee that led the comprehensive six-month process.

He explained that when an organization needs transformation change, for several reasons it’s often best to bring in an outside leader. On the other hand, when an organization is strong with a positive trajectory, an exceptional internal leader can provide stability, a deep understanding of the culture and people who are



STEVE GREEN

doing the great work and build a future vision on that foundation. The Search Committee reviewed applicants internally and externally from across the country.

“What’s happening in health care today is different than even five or six years ago. We needed someone with substantial academic leadership experience, a strong vision for leading through these interesting times, and an interprofessional team player who can help guide nursing locally and nationally into the future,” said Dittus.

The top candidates participated in an intensive two-hour interview process, fielding questions from the committee of faculty, students and administrators from throughout Vanderbilt. From there, the committee made recommendations to Balsler, who made the final decision.

“There was unanimous enthusiasm for Linda. We even had potential candidates early on who said, ‘If Linda Norman’s applying for the job, why would you consider anyone else?’ Even so, the process was thorough and broad and there were many strong candidates,” Dittus said. “It turns out we had a spectacular candidate internally.”

Miller, who also served on the dean search committee, echoes that sentiment.

Norman is applauded by a packed audience of faculty, staff and colleagues on the day she was officially named VUSN Dean.

“Linda is thoughtful, poised, articulate and she’s a

collaborator. She has all these attributes that set her up to be a fantastic leader, especially for a time where the whole health care world is changing. Her great strength is that she has the continuity and the history with the School of Nursing and yet can break free and set her own course.”

Lancaster said Norman is very intuitive and a very good judge of people. “I’ve seen her be very willing to do the work, and she doesn’t have to take the credit. I find her to be a really kind person, but tough as nails when she has to be,” Lancaster said.

Faculty Mentor

Norman’s Vanderbilt colleagues also offer high praise.

Joan King, Adult-Gerontology Acute Care Nurse Practitioner program director, remembers meeting her for the first time 22 years ago in an internal VUSN committee meeting. “She had a gentle spirit and appeared to be very open-minded. She wanted to know how we did things rather than telling people how to get things done,” she said.



DANIEL DUBOIS



A strong nursing program needs to integrate—not layer on top—things like evidence-based practice, quality improvement, team function and culture competency in everything.” *Linda Norman*

King was a faculty member when Norman joined the School in the early 1990s and considers Norman a mentor.

“She doesn’t ask you to do anything that she’s not prepared to do herself. She’s always right there with you, whatever the tasks or challenges are. She helped open doors for me in my career and has been by my side to help write grants,” said King.

One of Norman’s hallmarks to date has been facilitating the growth of the faculty, including redesigning several specialty tracks and various curricula. King credits Norman with helping the faculty grow, adapt and rise to the challenges, and credits

Conway-Welch, now Dean Emerita, with giving her the freedom to do that.

“We wouldn’t have had the critical care program without Linda,” said King.

Unlike most schools of nursing, VUSN has a dedicated clinical placement office, with staff focused on securing much-needed opportunities for students to work in a clinical setting with a provider supervisor, or preceptor. For King’s acute care nurse practitioner specialty, that means paving the way for nearly 80 students a semester to get this real-life experience.

Recently retired VUSN faculty member Carolyn Bess first met Norman in the late 1980s when the two were each pursu-

ing their Doctorate in the Science of Nursing degrees from the University of Alabama-Birmingham. Norman was working at Aquinas College at the time, and the two carpoled along the I-65 corridor. Bess had no idea her classmate would soon take a leadership position at VUSN.

“I always saw Linda and Colleen as a team,” said Bess. “Colleen had great ideas, but sifting through them to see how they would fit with the intent of the School of Nursing—I think that was Linda. Linda was key to moving those ideas forward.”

Bess has worked under four different VUSN deans, starting with Luther Christman.

“I’ve seen a lot of leadership styles,” said Bess, whose VUSN career spans more than 40 years. “The thing that impresses me about Linda is that she inspires faculty. She identifies and recognizes faculty members who really have potential and encourages them. She remembers what it was like to be an instructor and how others supported her.”

One example of Norman’s imprint on faculty was getting VUSN faculty who were primarily teaching faculty to pursue their doctoral education. In the past few years in particular, more than (20?) teaching faculty have earned their doctoral degrees—PhD or DNP—and others are enrolled in various programs.

“She didn’t just tell faculty to do it. She encouraged them, helped match them to specific programs and told them, ‘yes, you can do it,’” said Bess.

But Norman’s interest in those at VUSN doesn’t stop there. She is also widely admired by staff as well. For the last several years, Norman’s office was located on the second floor of Godchaux Hall, and she would often bring her own lunch and join in the lunch time conversation. The only rule: work talk was off limits. It was a time to talk about life, families, hobbies, etc.

“When my daughter, Helen, was accepted into the UVA School of Nursing, I remember Linda sending Helen a

stethoscope to welcome her to the profession and to her alma mater,” said Sarah Ramsey, assistant dean of Student Affairs.

Family Life

Norman has achieved career success while being a remarkable wife and mother, according to her family. She has been married to Don Norman for 43 years. The two met in Sunday school in Lynchburg, Va. Linda was attending her hometown church during a summer break at UVA, and Don was in the U.S. Army, visiting his aunt. Linda moved forward in the nursing profession, and Don, who is now retired, built a career in the printing industry.

Fast forward to present day and the couple has two grown children. Dennis, the oldest, is an executive vice president and chief financial officer for a multinational corporation and lives with his wife, Katie, 11-year-old son Drake and 7-year-old daughter Allie in Charlotte, N.C. Her daughter, Jan Norman, is an assistant district attorney for Davidson County and lives in Nashville.

“I’m the luckiest girl in the world to have her as my mother,” said Jan. “I’m very, very blessed to have her as a female role model, especially in my job where I see a lot of women who are victimized. I’m grateful that my mom raised me to have confidence in myself.”

Growing up in the Norman household meant a house full of laughter and children who grew up with accessible parents. Family dinners took place at home every night, and meals out were for special occasions only. It also meant 18-hour road trips from the family’s home in Virginia to Iowa, home base of Don’s extended family, each year with Don and Linda taking turns driving through the night so that the children could have special time with grandparents in a rural community environment.

“I remember watching my mom teach community CPR classes when I was 4 years old,” said Jan. “She came home one day, and I was teaching my friend how to do it.



ANNE RAYNER

I asked her if I could have a CPR baby for myself. She said it was too expensive.”

Dennis said Norman didn’t push them. “She just always expected us to do our best,” said Dennis. “I remember she helped me with my fifth grade science project—a working model of the heart. She talked me through how the heart works in great detail, much more than my teacher required. I argued that it was good enough, but mom didn’t want me to do the minimum to just get by. I didn’t agree at the time, but she was right.”

As an adult and a father, Dennis better appreciates his mom’s work/life balance. “She was always up reading papers in the living room at 3 a.m., but mom, as a professional, was never the first perspective I had of her as a kid,” he said. “And as grandparents, she and my dad are great with our kids. Mom, or as they call her ‘Gram,’ gets down on the floor and plays with them, asks my son about the latest video game and plays Barbies with my daughter. She’s all about interacting with them on a personal level.”

Next Steps

At a recent presentation she gave to School of Nursing faculty, Marilyn Dubree, MSN, RN, NE-BC, VUMC Executive Chief Nursing Officer, shared the Medical Center’s strategic plan. For

Pictured here: Norman, second from right, celebrates with newly pinned students following the VUSN Pinning Ceremony in August. (L to R) Fatima McElveen, Roslyn Greer, Hannah Jernigan, and Kaitlyn Neary.

each point, she provided an example of how Medical Center Nursing and the School of Nursing can work more closely together.

“We are entering a period where the clinical work and education at Vanderbilt can come together in innovative ways that improve practice and better educate future nurses. Linda is a tremendous partner and will make significant contributions to everything we do,” said Dubree.

Dittus believes whatever lies ahead, Norman is the right leader for these times. He refers to her as a Level 5 Leader, a definition from Jim Collin’s book “Good to Great.”

“These Level 5 leaders don’t focus on visibility and reward but rather the success of the organization,” said Dittus. “They hand off praise to others, yet accept the blame themselves. This is the type of leader at the helm of organizations that have gone from good to great. This is the type of leader the School of Nursing needs right now and has in Dean Linda Norman.”

Photo right: Children in the Palajunuj Valley of Quetzaltenango, Guatemala, play before Carnival—note the paper confetti in their hair. In 2011, eight VUSN students joined Primeros Pasos staff to help provide health care, education and community outreach to the rural clinic that serves 10 surrounding communities.

Nursing without borders

Student-driven interest expands VUSN's reach

Carol Ziegler's great-grandfather was a Rough Rider, charging into battle with Theodore Roosevelt during the Spanish-American War. He had an intimate view of the effects of foreign intervention and hammered into his descendants that cultures were to be respected, not interfered with.

The night she graduated from Vanderbilt University School of Nursing's Family Nurse Practitioner program, Ziegler met her future husband, a Kenyan named Kipkosgei Magut. Just a few months later, she was traveling to Kenya to meet his family with her great-grandfather's longstanding admonishments ringing in her ears.

BY LESLIE HILL
PHOTO COURTESY OF MAVIS SCHORN



Nares
Trench



BOLIVIA

MATO
GROSSO

Araguaia

Tocantins

GERAL DO GOIAS

S. Francisco

INHAÇOMA

Salvador

Aracaju

“As soon as his family heard I was a nurse they said I should start a clinic there. But I looked around and saw people in their 90s and one over 100 with all their teeth. I thought, ‘You don’t need me!’”

But she was interested in the state of health care in this very remote village, especially when she learned that Magut’s mother was an herbalist.

“They’re using artemis for malaria, which effectively treats malaria the same as the drugs we use. They deal with skin disease, a lot of cancer, some high blood pressure and diabetes. The main thing they’re lacking is trauma care,” Ziegler said.

They were also facing a health care worker shortage because all of the herbalists were older than 65 and few younger people were learning their trade. While Ziegler completed her Doctorate of Nursing Practice at VUSN, she decided to use her culminating scholarly project to interview the village’s traditional healers about their world view and practice and archive the information for the future.

“We found many barriers to their practice. The government has started protecting the forest, which is great for the plant and wildlife, but doesn’t allow these healers to go in and get the herbs they need. The government is also requiring licenses, which can put some competent healers out of practice. Now biotech companies are pirating the herbs that these villagers have developed over thousands of years. When all these tribes are involved, who gets the patent?” said Ziegler, who is now assistant professor in the FNP program and coordinates VUSN’s global health programs.

Ultimately, Ziegler learned the lesson that VUSN emphasizes in all global health work, and one her great-grandfather

would approve of—whatever you do, it must benefit the community.

“It’s really important from Vanderbilt’s perspective that whatever we do outside our borders we do because the people want us to be there. We could come up with all kinds of things that would be great learning experiences for students, but it also has to be good for that community,” Ziegler said.

With technology and travel making the world increasingly more accessible, more and more students are entering VUSN with a desire to participate in global health. Many have been on mission trips, served in the Peace Corps or studied abroad during college.

“I repeatedly hear from those students that when they were abroad they realized how important health was and that inspired them to be a nurse. They want to have the knowledge and skills to go back and make a difference,” said Mavis Schorn, PhD, CNM, senior associate dean for Academics. “That’s the nature of this next generation. They’re much more traveled and very concerned about the wider world and its needs.”

The school recently added a special session during the campus visit to talk about international programs because they were fielding so many inquiries.

“Our challenge is trying to fill their desire for global health and still meet, in a very compact time, their requirements in order to practice in the U.S.,” Schorn said.

VUSN students, faculty and alumni participate in patient care, education and

research around the globe, with the belief that experience and understanding about people from diverse populations enhances the quality of health care that can be provided in any location.

One of VUSN’s biggest partners is the Vanderbilt Institute for Global Health, which provides multidisciplinary research and training programs worldwide. Its elective courses are open to students across the University.

“Foundations of Global Health” takes a theoretical look at the state of global health and what can impact it beyond the disease burden, including the environment, socio-economic and political climate, culture and history of a place. “Foundational Skills in Global Health” is more practical with lessons on core field tools, needs assessment, implementation techniques and methodologies.

“Leadership Development in Global Health” is a new requirement that emphasizes leadership and management skills.

“There are a lot of people who want to do missions, but actually making that a reality in a substantive way can be very challenging. We are encouraging students to do more than a parachute in or out experience, and that a very real need in many global settings is to have good clinicians who are also skilled in leadership and management,” said Carol Etherington, MSN, RN, FAAN, associate director of Community Health Initiatives at VIGH and associate professor of Nursing at VUSN.

Etherington began discussing global health with former VUSN Dean Colleen

Conway-Welch in 1998, “long before global or international health was sexy or even seemed in the realm of possibility,” she recalled.

“We began a series of meetings called the VU-triple I, which stood for International Interdisciplinary Initiatives, with the law school, divinity school, medical school, nursing school and business school. It has always been special to me that the conversation was started in the School of Nursing,” Etherington said.

Today, VUSN is again a pioneer, this time in ways to incorporate global health into a demanding curriculum.

Mary Martin, CNM, was the first nursing student to complete VIGH’s Graduate Certificate in Global Health. While the certificate usually requires an overseas practicum, Martin focused on Arabic-speaking immigrants in the Department of Obstetrics and Gynecology at Vanderbilt, facilitating patient education through group settings to teach women to participate in their own health care.

“It was not at all a contrived placement. It was global health, without question, in a most innovative way. We really do think that global health can be done at home, and it’s the nursing students who are frontrunners with that concept,” Etherington said.

Project Pyramid, operated out of Owen Graduate School of Management, is another strong global health partner for VUSN. Approximately 35 students from across Vanderbilt’s graduate schools do coursework and plan and execute a spring break service trip. Past trips have included Guatemala and Nepal.

In addition to global health, students are immersed in interprofessional learning.

“Other students really appreciate having the nurses’ well-developed and sophisticated view of health care on the ground as it is really delivered, and the nurses really learn from business, engineering and law students. They all work beautifully together,” said Bart Victor, Cal Turner Professor of Moral Leadership and Project Pyramid faculty leader.



Global Health Nurses in Residence have a robust experience, learning from many different opportunities and people. Pictured L to R, Laine Scott-Nelson (VUSN '61) and Grace Appert. Courtesy of Vanderbilt Institute for Global Health.

Schorn said Project Pyramid emphasizes that global health can’t succeed without teamwork.

“You can treat for worms all day long, but if you haven’t worked with the engineer to improve the water supply, you’re not going to get very far. The more they learn how what one does impacts the other and learn to work together, it ultimately improves the whole,” Schorn said.

It has been Etherington’s long-held vision that nurses be an integral part of any global health team.

“With those very chronic and complex problems, where health is directly related to the environment, education, economics and the geopolitical issues going on, I think that nursing is the profession that has its finger on the pulse of how all those issues come together. But rarely are nurses pulled into the decision making in a lot of places,” she said.

That vision is partially realized this fall with the first participants in the Global Health Nurse in Residence Program, an opportunity for Vanderbilt affiliated nurses to serve, train, network and collaborate with nurses and other health care workers for up to 12 weeks in the Central Province of Kenya.

Supported by VUSN alumna Poppy Buchanan, this program is the first to focus solely on providing nurses and nurse

practitioners with a funded opportunity for a global health immersion experience. Grace Appert and Laine Scott-Nelson were selected as the inaugural Nurses in Residence.

“We always emphasize how important it is to be sensitive to the uniqueness of each culture and ethnicity,” Etherington said. “But the reason nurses are so important to this effort is that with all of those differences, at the heart of global health is the understanding that there really isn’t that much difference in human beings. And nurses get that.”

Zambia and Nicaragua

Michelle Drew has made it her mission to “infect” the next generation of nurses with the global health bug.

“Teaching students, I try to reinforce the idea to work in a resource-poor area. I want to equip them with the knowledge, understanding and desire to work in those areas. It’s amazing to me that the idea of ‘service’ has become so ingrained in the U.S. and I hope it continues. It’s important to expose students to the idea of caring for ‘the least of these.’”

Drew has spent more than a decade doing just that in rural Zambia and Nicaragua. It started with a medical outreach trip to Zambia in 2001 and quickly

turned into a full-time position in a mission-based hospital there.

“I first studied tropical medicine and then came to Vanderbilt to earn my MSN in Nurse-Midwifery/FNP program to give me the training I needed to be able to serve the whole community, but women and children were my passion from the start because I was struck by the disparity and how the position of women and children in the prevailing culture affected the health care they received.”

Even though the World Health Organization recommended pregnant women be treated with anti-malarial drugs in their third trimester, the patriarchal society gave first priority to males and first-born children.

“You have to really take the cultural temperature and develop relationships to institute change. It’s easy to walk around as a bull-in-a-china-shop American, but that wouldn’t have gotten me anywhere. I can’t overstress cultural competence,” Drew said.

After 10 years in Zambia, a desire to be closer to her aging parents led Drew to a non-governmental organization in Nicaragua that develops community-based maternal/child health networks and

“You have to really take the cultural temperature and develop relationships to institute change. It’s easy to walk around as a bull-in-a-china-shop American, but that wouldn’t have gotten me anywhere. I can’t overstress cultural competence.” – Michelle Drew

trains and supports traditional birth attendants and midwives.

“The geography is very mountainous and volcanic. Getting women to come down to the hospital for an attended birth is not always feasible. They still tend to deliver at home, and our goal is to have trained women there with them,” Drew explained.

The non-governmental organization provides a casa maternal to feed and house the women who travel down from the mountains before delivery.

Drew also leads students on international trips and has seen the global health “buzz word” grow over the years.

“I went from maybe once a year getting a student inquiry to now turning people away in droves,” she said. “To go from seeing problems all due to our sedentary lifestyle—knee pain, diabetes, high blood pressure—in the U.S. to being in Nicaragua seeing scabies and pin

worms is an eye-opener. I hope it reinforces their desire to work with the underserved, even in the U.S.”

South Africa

When Stephenie Plowden’s husband received a Fulbright Fellowship to study in South Africa, she immediately looked into ways she could join him and continue her Nurse-Midwifery/FNP studies there. The answer was a five-month independent study through the University of Cape Town, which has a partnership with Vanderbilt University.

Plowden worked in a state-sponsored birth center that is the primary level of care for pregnant women without private insurance.

“Women don’t have an option. There are no epidurals, no continuous fetal monitoring, no Doppler. You could definitely say it was low resource.”

The center averaged 400 births a month in six delivery beds. Delivering at least two herself every shift, Plowden quickly went back to basics.

“I learned to palpate where the baby was lying to get the best heart rate. We don’t do that in the U.S. because we have



This page: Patients line up waiting to be seen at Namwianga Rural Health Center, Kalomo, Zambia.

Opposite page: 1 Nandi women elders attend a morning tea and planning meeting in Kitale, Kenya; 2 Carol Zeigler and husband, Kipkosgei Magut, center, with Nandi women; 3 Children of a Kaonde village line up for songs and games before a child wellness day, Mumena, Zambia; 4 Mission children wait to greet Michelle Drew as she walks home after a day at the Namwianga Mission, Kalomo, Zambia.

1



2



3



4



machines. In South Africa, my main tools were my hands, ears and eyes.”

But, she emphasized, her greatest tool was humility.

“Being an intruder or guest, I learned to put aside what I saw in my world view as best practice and took in what they could share with me. It takes humility to learn from each other and to value our various backgrounds and experiences. I didn’t want to make the mistake of playing God and telling them how they

should reform their country and save Africa. I saw a lot of goodness in many things they do that we lack.”

Plowden noted a great disparity between the educated health provider and the uneducated patient and was often frustrated with providers who didn’t listen to their patients or give them time to express concerns.

“Through these experiences, I know I’m a better midwife, but I feel like I’m a richer person by the impact of these

South African women. I’m inspired by what they endured, and I never want to be too busy to explain something or to reassure someone who is scared.”

After graduation in May, Plowden would like to focus on providing the midwifery model of care to marginalized women in the U.S.

“I feel like immigrants and refugees and other marginalized women often receive substandard care because they don’t know how to get anything better. I want to empower women through birth, and that starts with women who are not empowered in life.”

“I feel like immigrants and refugees and other marginalized women often receive substandard care because they don’t know how to get anything better. I want to empower women through birth, and that starts with women who are not empowered in life.” – Stephenie Plowden



China

Erin Dittmer, an adult and women’s health nurse practitioner student, just spent seven months in Beijing studying Chinese as a David L. Boren Fellow.

Sponsored by the National Security Education Program, the David L. Boren Scholarships and Fellowships are a federal initiative designed to build a broader and more qualified pool of U.S. citizens with foreign language and international skills. In exchange for funding, Boren award recipients agree to work in the federal government for at least one year.

Dittmer taught English in China for 13 prior to entering VUSN, and seeing the SARS outbreak there contributed to her decision to change fields. During her fellowship, she was a full-time language student and arranged some clinical observations and language exchange with local health care students to acquire more medical vocabulary.

For anyone interested in working long term with a non-English speaking population, Dittmer encourages investing time in learning the population’s language.

This 18-year-old Tonga woman walked to a nearby village in labor after hearing a nursing student was providing free medical care. Her baby, shown here in Simalundu, Zambia, was delivered by headlamp in the room of an abandoned health center that hadn’t had a government nurse for more than five years.

“Besides the practical skill of being able to use the language for communication, the experience of being a foreign language learner helps to develop empathy for those we encounter in the U.S. whose first language is not English,” she said.

“As health care providers, we need to remember how vulnerable patients feel when they are in need of medical care but don’t understand what is going on around them or can’t express themselves clearly because of language differences. Both living abroad and studying a foreign language can help to cultivate this awareness.”

Faculty goes global

Global health activity at VUSN is not limited to students. Many faculty members have formed collaborations at Queen’s University in Belfast, Ireland, Hong Kong University, and Melbourne University in Australia.

In September, Karen D’Apolito, PhD, APN, NNP-BC, FAAN, professor of Nursing and director of the Neonatal Nurse Practitioner Program, will spend five days at Queen’s University to explore possibilities for cooperative research or faculty exchanges.

“I plan to meet the faculty, visit their nurseries and talk about ideas for collaboration. I’m seeking information. Once I find out more about what they do and what they’re interested in, then we can decide the best way to move forward,” D’Apolito said.

She said she is excited to see how differently the Irish manage newborns and how they teach students, and says learning from other nations can inspire new innovations.

“They may educate students differently than we do here in the U.S. Do they use distance education and/or problem-centered learning? What is required for faculty education? These exchanges of information may lead to new and different teaching strategies that can enhance the education of students in the U.S. and abroad.”

Nursing Leadership in Global Health Symposium

In February, Vanderbilt University will host the Nursing Leadership in Global Health Symposium, which aims to promote the nursing model of care as a means to improve the health and well-being of vulnerable populations in resource-limited settings around the globe.

The symposium is open to nurses and other health care workers and administrators who are involved with global health pursuits.

An invitation-only summit of global health leaders will take place on Feb. 26, 2014, followed by the symposium featuring keynote addresses, plenary panels and break-out sessions Feb. 27-28. Topics include the state of nursing in global health, patient-centered care around the globe, innovative nurse-led programs in resource-limited settings and influencing global health by influencing policy.

Her Royal Highness Princess Muna Al-Hussein, the mother of His Majesty King Abdullah the Second of Jordan, is confirmed to attend and has taken a special interest in developing nursing as a significant force in the quality and the distribution of health care in Jordan.

To date, other speakers include:

- Sheila Davis, Chief Nursing Officer at Partners in Health (PIH), a global non-governmental organization currently working in 12 countries
- William H. Frist, MD, a heart and lung transplant surgeon and former U.S. Senate Majority Leader
- Christine Hancock, founder and director of C3 Collaborating for Health
- Judith Oulton, CEO of the International Council of Nursing from 1995-2008
- Muhammed Pate, MD, Former Minister of State for Health, Nigeria.

More information is available at www.nlgh2014.org.



an interview with Terri Donaldson

Vanderbilt Nurse recently sat down with Terri Donaldson, DNP, RN, ACNP-BC, director of the Doctor of Nursing Practice program. Donaldson has nearly 30 years of experience in cardiac and critical care nursing, has been on faculty since 2001, and became the DNP program director in 2012. She shares why the DNP is one of the most fascinating and vital pursuits in nursing today.

What is the Doctor of Nursing Practice (DNP)?

The Doctor of Nursing Practice is a practice-focused degree preparing advanced practice nurses to become leaders in bringing evidence-based knowledge into clinical practice. This improves health outcomes for patients as well as contributes to nursing administration and education. We started our program in 2008 with 32 students. Typically, we now enroll 60 new DNP students each year.

Why is the DNP valuable?

The world of health care and nursing is constantly changing. National health care reform has caused more

people to look at health care cost and quality. I've been in nursing for more than 28 years and can tell you firsthand that nursing is a constantly evolving profession. Many advanced practice nurses find themselves needing to rapidly access and appraise evidence so they can enhance care for complex patients. They also need to be prepared for ever-increasing national concerns about access, quality, cost and safety. To address these issues, the nursing world needs a higher level of preparation for leaders who can design and provide care for diverse populations of patients. The DNP fulfills that demand.

Can you provide some examples?

The DNP broadens your practice to think about entire populations of patients rather than the individual, so you can make a profound difference in health care delivery. A good example is Shawana Crawford who was working as an acute care nurse practitioner in a hepatology and liver transplant practice in Dallas. She wanted to do a quality improvement plan as her DNP scholarly project to determine how to best monitor patients with Hepatitis C, a group who has a high risk for developing liver cancer. She also wanted to ensure that providers in her practice were following national evidence-based practice guidelines. After completing her project and graduating, Shawana's next step was to implement strategies in her practice using the electronic medical record, to make sure patients with Hepatitis C are appropriately monitored to improve outcomes and decrease mortality.

Is the DNP necessary?

In health care today, it can take as much as 17 years until a new evidence-based approach becomes a standard part of practice. That gap is much too long and does a tremendous disservice to our patients. The DNP graduate is uniquely positioned to close that time gap. He or

she has the education to evaluate evidence and manage new knowledge so it can be used in practice and utilize effective tools to support clinical decision making.

What does the nursing profession say?

Several reports from the Institute of Medicine underscore the need for an appropriately trained health care workforce to meet these challenges in the 21st century. Likewise, the American Association of Colleges of Nursing identified the need to change nursing education to meet the demands of an increasingly complex health care system and recommended adoption of the DNP by 2015 as the terminal degree for advanced practice nurses.

How are the DNP and PhD programs different?

The PhD program prepares researchers who discover new knowledge. The DNP graduate translates evidence-based research into practice. So, for instance, someone with a PhD in Nursing may determine a specific intervention helps senior citizens with diabetes. The DNP graduate can translate those findings to his or her population of patients, applying the evidence to day-to-day practice.



We strive to create a community where students have a sense of belonging with each other and with faculty.

Do other health professions require a doctoral degree?

Yes, other health professions like medicine, dentistry, pharmacy, psychology, physical therapy and audiology all offer practice doctorates. Advanced practice nurses need the DNP for the advanced education that it provides and to play an equal role on interdisciplinary health care teams.

What about the DNP and population health management?

The DNP is well poised to look at best practice and optimization of care delivery in the most cost-effective way. A DNP graduate has the knowledge, skills and expertise to influence outcomes. The DNP graduate has an enhanced skill set that builds on master's education.

A great example is our 2013 Founder's Award medalist, Chaquetta Thomas Johnson, who is the regional consultant for the Louisiana Office of Public Health. Chaquetta did her DNP scholarly work on birth control methods and their relation to sexually transmitted diseases. The result was a more efficient and effective reproductive health model that was implemented statewide in her home state of Louisiana in 2012.

Even though not always face-to-face, students have access to and support from faculty. Our DNP graduates often tell us they are happily surprised at how closely they have connected with their classmates and faculty.

Does Vanderbilt offer distance learning?

Vanderbilt School of Nursing uses a blended distance learning environment which provides content in a variety of formats: courses offered in concentrated blocks of time on campus, online conferencing, and digital video and distributed course delivery methods that allow continued faculty contact between sessions. Other coursework, scholarly interaction and clinical application can take place in students' home locations so they do not have to relocate or give up employment.

What is different about the Vanderbilt DNP program?

Vanderbilt has a long history in nursing education and innovative methods. We have a practice-active faculty in nurse-managed clinics and a robust infrastructure that supports online learning. We have a clinical practice focus for certified NPs, nurse-midwives, clinical nurse specialists and registered nurse anesthetists, and a system focus for nursing administrators and nursing informaticists.

Faculty-student relationships are very important. Students are very deliberately matched with faculty mentors to meet the students' interests and guide them through their doctoral education. We strive to create a community where students have a sense of belonging with each other and with

Do most students work while doing the program?

Almost everyone in the program is working in their field, which gives them access to a patient population and practice environment related to their specific area of interest. It also allows lessons learned in any given class or activity to be immediately applied to their current work environment. Students entering with a BSN

The Vanderbilt DNP Experience

Vanderbilt's DNP program is built upon our 100+ year history of innovation in nursing education and is tailored to your nursing educational background whether it is in clinical practice, health systems or informatics.

- Applicants (CNS, CNM, CRNA or NP) who enter with an MSN and applicants with an MSN in health systems management or nursing informatics complete 35 semester credit hours. DNP requirements can be completed in either 4 semesters of full time study or six semesters of part-time study.
- APRN applicants may also choose to add an additional advanced practice certification to the regular DNP course of study. Doing so typically adds an extra two to three semesters to the program of study.
- Applicants with a Master of Nursing Education or Clinical Nurse Leader must earn a post-master's certificate in an advanced practice specialty in conjunction with the DNP which will add an additional two or three semesters to the program of study.

The DNP program is fully accredited by the ACEN and meets recommendations of the American Association of Colleges of Nursing and the National Organization of Nurse Practitioner Faculties.



must come to campus several times each semester during their MSN-level courses. DNP students are on campus for one week at the beginning of each semester.

What are the toughest classes?

It's different for everyone. In the DNP program, we challenge students to think conceptually and that can be a new way of thinking compared to the concrete actions—history, exam, plan of care steps—in practice. Also, we spend a lot of time on scholarly writing and have developed an environment to help students augment their skills if they are needed.

What does the DNP mean to nursing?

Today nurses are much more valued in the nation's health care system than in the past. Advanced practice nurses are exponentially more accepted in the health care delivery

model than even 10 years ago. Our new Doctors of Nursing Practice are already infusing innovative knowledge into clinical practice, improving health care outcomes and strengthening nursing management and education. They have a growing role in interdisciplinary teams and will continue making meaningful contributions to the professional practice of nursing.

What is compensation like for a DNP?

DNP graduates may stay in their current jobs, but find themselves offering different contributions. This often creates opportunities for advancement to other positions that may increase earning potential. One recent example is John Savage, a CRNA, who graduated from the DNP program in 2012. His work in standalone surgery centers was directly related to things he was learning and implementing

into his workplace. He was promoted even before he graduated.

What have you learned about the DNP over the last five years?

We are constantly learning from our students. We started with a full-time only program that lasted five semesters. We learned that students wanted a part-time option and they wanted elective courses. So we restructured the curriculum within the same credit hours. Now students have opportunities to take electives and to have either a full-time or part-time program of study. Each student must complete a scholarly project as part of their curriculum, and we continuously evaluate that

process to make sure students are getting the best outcome from their educational experience. We consistently review our processes so we can continue to improve.

What do you want everyone to know about the Vanderbilt DNP program?

We have a high standard of excellence and expect nothing less from our students and ourselves. We offer a strong community. Students are not here alone, and the goal of the faculty is the success of every student.

web link

Visit nursing.vanderbilt.edu/dnp/index.html for more information.

The Essentials of Doctoral Education for Advanced Nursing Practices required by the American Association of College of Nursing

Essential 1: Scientific Underpinnings for Practice

Essential 2: Organizational and Systems Leadership for Quality Improvement and Systems Thinking

Essential 3: Clinical Scholarship and Analytical Methods for Evidence-Based Practice

Essential 4: Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care

Essential 5: Health Care Policy for Advocacy in Health Care

Essential 6: Interprofessional Collaboration for Improving Patient and Population Health Outcomes

Essential 7: Clinical Prevention and Population Health for Improving the Nation's Health

Essential 8: Advanced Nursing Practice

50s

Anita Hart Fuller, BSN '59, retired with her husband to Arkansas in 1993. They live a quiet life and enjoy watching lots of movies together.

60s

Sara Kathryn "Sally" Herr Lowe, BSN '63, and Robert W. Lowe, Sr., MD '64, celebrated their 50th wedding anniversary on Aug. 24. Their children and grandchildren hosted a celebration in Huntington, W. Va., in August.

Ginger Trundle Manley, BSN '66, MSN '81, published a book, "Assisted Loving: The Journey through Sexuality and Aging." It can be purchased at www.gingermanley.com

Charlene Bell Tosi, BSN '68 lives in Fenton, Mich., and has published a new book, "Discover Your Woman Within: Journey to Wholeness." It can be purchased at www.discoveryourwomanwithin.com.

70s

Diane Cody Roberts, MPH, BSN '73, RN, was promoted to

director of Health Services at The Kinkaid School in Houston, Texas. Kinkaid is a non-sectarian college preparatory day school enrolling more than 1,400 boys and girls in grades Pre-K - 12.

Carol Spillman Krogsgard, BSN '73, retired in August 2012 after 40 years of hospital nursing in various specialties. She enjoys traveling with her husband and loves the great weather in her hometown of Mobile, Ala.

Sherry Bratton Leffers, BSN '73, lives in Tampa, Fla., and spends the summers in Big Sky, Montana. She loves gardening and traveling with her husband of 41 years. The couple has four grown children and six grandchildren. Retired from nursing for 12 years, Leffers volunteers for her church and her community.

Kathy Osten, BSN '73, retired from 39 years of full-time nursing. A majority of her career was spent in Critical Care Nursing and Cardiac Case Management at Saint Thomas Hospital in Nashville. She spends her time traveling, boating and doing volunteer work.

Vicki Henderson Burslem, BSN '74, relocated with her husband to Jackson, Miss. She is on faculty at the University of Mississippi Medical Center, teaching in the accelerated BSN track and working at an inner city Jackson clinic providing comprehensive and reproductive care to at-risk teens. She and Susan Johnson Sizemore, CNM, were named the recipients of the 2013 Dorothea M. Lang Pioneer Award at the Annual Meeting of the American College of Nurse-Midwives.

Carol Etherington, MSN '75, finished a four-week mission trip to the Middle East with MSF/Doctors Without Borders to complete a report on an Iraqi Mental Health Project carried out from 2009-2013. The project involved training national doctors and other health care providers in community-based mental health and responding to patients with war-related trauma. The project was handed over to the Iraqi Minister of Health in June.

Susan Winchester, BSN '75, has retired and moved back to Nashville's Del Webb community. She is having fun redecorating her new home, participating in numerous activities and re-exploring Nashville.

Noël Marie Bassi Joyce, BSN '77, is practicing "home health nursing" with her 93-year-old mother and 88-year-old mother-in-law. She is also chairing the West Side Walk to End Alzheimer's in Cleveland for the second year. Her husband, Kevin, and their three sons and family business keep the couple busy. Their daughter is pursuing nursing at Marquette University School of Nursing.



Pictured third from left, Susan Slater, BSN '73, was surrounded by colleagues and friends at her retirement party. Slater retired from Vanderbilt University Medical Center Nursing earlier this year.

Cathy Cohill Turner Carter, BSN '77, retired from the USN Nurse Corps in 2005, and is working for Valor/VA Health Care in a community-based outpatient clinic north of Seattle. She feels blessed to care for other Veterans in the Northwest.

Jane Dempster, BSN '78, received the 2013 Baylor University Medical Center "Abdominal Transplant Nurse of the Year" award. She was also named one of the "Dallas Fort Worth Great 100 Nurses," nominated by one of her transplant patients.

80s

Diane Collins Hishta, BSN '80, retired from 13 years of school nursing, including serving as assistant coordinator of health and safety at the Westminster Schools in Atlanta. She recently traveled to London with her husband, Kevin (JD '82), and enjoys time on Lake Burton and Amelia Island.

Donna Ruth, BSN '80, MSN '90, is the director of Educational Services for the Association of Women's Health, Obstetric and Neonatal Nurses, headquartered in Washington, D.C.



Holly Hines Newman, BSN '72, attended the University of California-San Diego in 2005 to become an International Board Certified Lactation Consultant. She has a private practice

as a lactation consultant and is a breastfeeding coordinator for the Amador Calaveras Women Infants and Children program. Last fall, she and her husband traveled to Tanzania where she taught breastfeeding and traditional birth attendant classes. The couple has nine grandchildren.

Lauren Benya, BSN '85, is happily married and working in Ponte Vedra Beach, Fla. She loves her location and welcomes visits from old friends.

Jean Griffin Bisio, BSN '82, is senior vice president of Healthcare Management Services at ConnectCare, a subsidiary of Emblem Health. She oversees all clinical management services, network contracting, provider relations, pharmacy, quality and medical economics. Bisio most recently served as president of Humana's complex and chronic care division in Tampa, Fla.

Kathleen Cona Menard, BSN '86, and husband, Dale, have a daughter, Elizabeth, who is attending Vanderbilt this fall. Kathleen works in Quality Management at Frye Regional Medical Center in Hickory, N.C.

Doug Arrington, MSN '88, was promoted to director in the Research Administration Office at University of Texas Southwestern Medical Center in Dallas. He also serves as the director of Clinical Research Facilitation and is a DNP student at UT Arlington in Arlington, Texas.

DeMoyné Culpepper, BSN '89, MSN '00, recently earned board certification with American Nurses' Credentialing Center Informatics Nursing. She also recently traveled to Scotland, and plans to hike Mt. Kilimanjaro in Africa this fall.

Jan Dunn, MSN '89, retired from Nashville's Saint Thomas Hospital after 42 years. She volunteers as a parish nurse for Christ the King Catholic Church in Nashville and is a volunteer faculty member for the Faith Community Nurse Liaison at

Saint Thomas Health Services. She has two grandsons and another grandbaby on the way.

90s

Col (Ret.) Diana Ruzicka, MSN '93, accompanied Special Needs Pilgrims to the Sanctuary at Lourdes, France, serving as a companion to her mother-in-law. Her nurse skills were quickly put to use when the Gaff River flooded and disaster and evacuation plans were implemented.

John Michael Briley, DNP, MSN '94, received an award by Novartis in recognition of an undying effort to prevent and treat hypertension. Additionally, the mayor of Jackson, Tenn., awarded Briley with the city's Civic Pride Award.

Mark Young, MSN '96, was appointed to the Tennessee State Board of Nursing by Gov. Bill Haslam in August 2012. After a short tenure as Rear Detachment Commander of the 4203rd USAH, he was mobilized with the U.S. Army Reserve and currently is at Fort Hood, Texas.

Kate Heyden, MSN '98, is serving at the health unit in the U.S. Embassy in Kabul during drawdown.

2000s

Bedelia Russell, MSN '01, published "Intellectual Curiosity: A Principle-Based Concept Analysis" in the April/June 2013 issue of *Advances in Nursing Science (ANS)*.

Helen Dale-Slyh, MSN '03, graduated with a PhD from Ohio State University. Her dissertation was entitled,

"Relationship of discrimination and early life socioeconomic on health outcomes in healthy young African-American women."

Christopher Castle, MSN '03, is a nurse practitioner at Greeneville Orthopaedic Clinic in Greeneville, Tenn., and is pastor of Phipps Bend Free Will Baptist Church, Surgoinsville, Tenn. He and his wife organized the 2nd Annual Cooper's Race 5K Run and 3K Walk in September to bring awareness to Mitochondrial Disorders. The race was created in honor of their 5-year-old son Cooper. See www.mitoaction.org.

Sarah Lowe Hill, MSN '03, and husband, Michael, welcomed son, Isaac Michael Hill, on April 29. Sarah currently practices at Brentwood Dermatology.

Tanya Sorrell, MSN '03, earned her PhD in Nursing from the University of Arizona in Tucson in May 2013. Her dissertation was titled "Mental Health Treatment Preferences for Persons of Mexican Heritage." She will present her research results at the upcoming Transcultural Nursing Society and American Public Health Association national conferences. She continues her private practice, Yuma Mental Health & Wellness Center.

Margaret Robertson, MSN '04, earned her Doctorate of Nursing degree from Oakland University in Rochester, Mich. She is a nurse practitioner in a community mental health practice, Carey Counseling Center in Trenton, Tenn.

Amy Denise Woodring Cochran, MSN '05, CNM, is the co-founder of Journey of

Life Midwifery Services, a home birth practice serving Northeast Georgia and Northwest South Carolina. The practice opened in December 2012.

Melissa Willmarth, MSN '05, DNP '10, was accepted to the 2013-2014 AACN Leadership in Academic Nursing Fellowship program. She is an associate professor of Nursing and DNP program director at the University of Cincinnati.

Katherine Dougherty Estrada, MSN '06, and husband, Brian, welcomed daughter Eleanor Anne, on July 18, joining big sister Mary Rose. Katherine was appointed adjunct faculty for the Geisel School of Medicine at Dartmouth College. The family moved to the Twin Cities, N.H., in August.

Lisa Hockersmith, MSN '06, has accepted a position at Lindner Center of Hope in Cincinnati.



Frances Likis, MSN '94, (left), editor-in-chief of the *Journal of Midwifery & Women's Health*, with Cara Osborne, MSN '01.



Clarissa Givens Crunk, MSN '08, lives in Franklin, Tenn. She opened Together Women's Wellness, her own practice in Columbia, Tenn., an ambulatory gynecology clinic in a shared location with Columbia Menopause Clinic, the office of Joel Hargrove, M.D., and Chris Staley, MSN '11. Clarissa is married to Adam Crunk, VU '06.

Bethany Domzal Sanders, MSN '06, works at the VUSN nurse-midwifery practice. She was married in October 2010, and her son was delivered by Amy Denise Woodring Cochran, MSN '05, in April 2012.

Letizia Lajuan Baxter, MSN '07, teaches at Middle Tennessee State University School of Nursing in Murfreesboro, Tenn., and pre-



Angela Rowe, MSN '08, is a clinical nurse specialist at Arkansas Children's Hospital in Little Rock. She and her husband have welcomed two boys into their family, Brayden Allen in December 2009, and Keaton Edward in November 2012.

scribes at a mental health cooperative. She hopes to open a bakery with her new husband, and is mother to 4-year-old Jayce.

Ashley N Davis, MSN '07, CCRN, NE-BC, RN, is the assistant manager of the Surgical Intensive Care Unit at Vanderbilt. She recently presented at the AACN National Teaching Institute (NTI) Conference on empowering bedside staff in the hiring and recruiting process, and has developed several poster presentations on central line-associated bloodstream infection reduction in the ICU.

Anna Bergman Kirk, MSN '07, is a nurse practitioner at Vanderbilt Franklin Women's Center. She and husband, Chris, welcomed their second child, Caroline Avery, in January.

April Kapu, DNP '13, MSN '05, has been selected as a fellow of the American Association of Nurse Practitioners (FAANP).

Shannon L. McGrath, MSN '00, joined the Red Rock Fertility Center in Henderson, Nev. McGrath has been working in the field of reproductive

endocrinology for 13 years. She is a member of the American Society for Reproductive Medicine and the National association of Nurse Practitioners in Women's Health.

Cara Osborne, MSN '01, assistant professor of Nursing at University of Arkansas, received the *Journal of Midwifery & Women's Health's* Best Research Article Award. She was lead author on "First Birth Cesarean and Risk of Antepartum Fetal Death in a Subsequent Pregnancy," concluding that there is an increased risk of antepartum fetal death in subsequent pregnancies for women whose first birth was by C-section. It was published in the journal's January/February 2012 edition.

Gerald Meredith, DNP '10, MSN '01, has accepted an additional position as director of Behavioral Health for an Alzheimer's unit in Johnson City, Tenn., along with his full-time work with the Veterans Administration.

IN MEMORIAM

Eunice Moe Brock, BSN '41, Liaocheng City, China, died April 28.

Emma Gwendoline Curtis Edguer, BSN '47, Beachwood, Ohio, died Jan. 30.

Susanna S. Mobley, BSN '48, Johnson City, Tenn., died April 9.

Mary Wofford Morris, BSN '48, Cartersville, Ga., died Feb. 8.

Nadine B. Turner, BSN '48, Saint Louis, died April 9.

Bessie Balch, BSN '49,

Nashville, died in January.

Helen Clap, BSN '54, Fayetteville, NC, died July 25.

Sarah Bryson Nash, BSN '54, Avondale Estates, Ga., died March 8.

Patricia M. Jones, BSN '58, Chillicothe, Ohio, died Oct. 30, 2012.

Betty Montfoort, NR '59, Topeka, Kan., died Dec. 26, 2012.

Linda McNeely, BSN '60, Mount Airy, Md., died Feb. 1.

Georgiana B. Stuart, BSN '60, Saint Louis, died Feb. 13.

Verla W. Vaughan, MSN '76, Nashville, died Feb. 24.

Sara Lou Todd Berg, MSN '78, Columbia, Tenn., died July 23.

SEND ALUMNI NEWS AND

PHOTOS TO

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2013 Commencement

Vanderbilt Commencement and VUSN's Academic Hooding Ceremony took place on May 10. This year's ceremony recognized 20 DNP students, 407 master's-prepared graduates and three who earned their PhD degrees in the Science of Nursing.



For more pictures, visit VUSN at flickr.com/photos/vanderbilt-nursing-school



1. Rebecca Lauren Smith and grandmother Flavil Hatcher share a moment after the official ceremonies.

2. VUSN Founder's Medalist Chaquetta Thomas Johnson is a DNP student whose scholarly project resulted in a reproductive health model that was implemented throughout her home state of Louisiana.

3. Leslie Hopkins, left, and Linda Norman, right, hood Joshua Thornsberry, who completed the Adult Gerontology Primary Care Nurse Practitioner program.

4. (Left to right) Baby Micah dons Vanderbilt attire to celebrate graduation with mom, Molly Tolan, and her classmate Lily Bierley.

5. Bonnie Pilon, left, and Linda Norman, right, hood Health Systems Management graduate Mary Muchendu. Muchendu and classmate, Peris Kariuki, not pictured, are based in Kenya. They started the DNP program this fall.

6. Colleen Conway-Welch begins the processional to the VUSN Academic Hooding Ceremony, marking her last ceremony as dean.





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