Dear College of Nursing Alumni and Friends,

Advocacy is a vital role of professional nurses. An advocate is a leader who uses their position to influence the regulation of nursing practice and the development of health policies that improve access to safe, quality and affordable health care. What better timing to showcase and honor advocates than 2017, a milestone year for the profession of nursing in the state.

This issue celebrates 100 years of the South Dakota Board of Nursing (SDBON) and recognizes the outstanding leadership of the current executive director, Gloria Damgaard ’88 M.S., and nursing program director, Linda Young ’87/’96 M.S. Many alumni have served as members and leaders on the Board of Nursing, which regulates the safe practice of nursing and assures that the S.D. Nurse Practice Act language supports nurses to practice to the full scope of their license or certification. In September, the house of nursing celebrated the first century of the SDBON and looked forward to the next 100 years.

Coalition building is essential to advancing a health policy agenda that assures access to health care especially for rural America. Research evidence supports the high quality, cost-effective primary health care outcomes of advanced practice registered nurses (APRNs), especially certified nurse practitioners and certified nurse midwives (CNPs/CNMs) and their retention in rural areas. What better year than 2017 to achieve a major milestone in access to health care through the advocacy work of the S.D. APRN Coalition. This issues share the story of Session Bill 61 (SB61), which modernized the regulation of CNPs/CNMs to improve access to rural primary care. The coalition was formed to build support from within the nurse community and draft preliminary legislation. Strategic support was secured from legislators and the executive branch. The coalition hosted meetings with key stakeholders and supporting organizations, hired a professional health lobbyist, and implemented a legislative outreach and communications plan before and following introducing SB61 during the 2017 S.D. Legislative session. The initial APRN coalition included nurses elected to state office in both the Senate and the House of Representatives; nurse leaders from health systems, higher education, professional nursing organizations, the state Board of Nursing, and the National Council of State Boards of Nursing. Additional stakeholder organizations were brought into coalition before introducing legislation, which was ultimately signed into law by Gov. Dennis Daugaard Feb. 23, 2017.

Advocates assure that health policies protect health. The harmful effects of smoking and tobacco product use are well-known, yet this behavioral risk factor continues to be the leading preventable contributor to morbidity and mortality in the state and across the country. Model health policies that protect health through the regulation of tobacco and tobacco-related product use are widely available through the Centers for Disease Control and Prevention, yet their adoption remains a public health priority. College of Nursing faculty and students, as well as the SDSU Health coalition lead the way in assuring that health-care facilities in our state, and even the SDSU campus, adopt these model policies. Just as this issue was going to press, President Barry Dunn announced the adoption of the smoking and tobacco-free campus policy.

Our role as advocates will never cease, and our determination to improve health and access to health care is unwavering. SDSU nurses are leading the way!

Nancy Fahrenwald, Ph.D., RN, PHNA-BC, FAAN
Dean and Professor
SDSU College of Nursing (B.S. ’83)
Cover photo: Gloria Damgaard ’88 M.S. and Linda Young ’87/’96 M.S. (right) look over an upcoming agenda for the 100th Anniversary Celebration for the South Dakota Board of Nursing. The graduates have been at the forefront for several policy changes in South Dakota.

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The South Dakota Board of Nursing recently held its 100th Anniversary Celebration. Current and former members of the College of Nursing attended.
Improving access to care

SDSU alumni had several key roles in the state’s vote on Session Bill 61

When a patient did not show up for an appointment, Sue Rooks chose to listen online to the South Dakota State Legislature session. The session was important to her, because as a certified nurse midwife, the Legislature was voting on Session Bill 61, which would allow certified nurse practitioners and certified nurse midwives to practice without a written agreement by a collaborating physician.

“I started jumping up and down for joy. I ran around telling everyone in the place the bill passed,” said Rooks, who works at the Black Hills Family Health Clinic in Hot Springs.

SB61 took effect July 1. South Dakota was the 22nd state to authorize nurse practitioners and nurse midwives to provide the full scope of services they’re educated and clinically prepared to deliver, and it retires the state’s board of medicine oversight of nursing practice.

The passing got national attention.

Linda Young was in the Denver International Airport when someone asked her, “How did you in South Dakota get SB61 passed so quickly?”
Young ’87/’96 M.S., a nursing program specialist with the South Dakota Board of Nursing and program director for the S.D. Center for Nursing Workforce, replied to the person, who was from California, “it’s having the right people do the right things.”

One of those people was Deb Soholt ’90 M.S., who sponsored the bill in the South Dakota Senate. Jean Hunhoff ’76 was the sponsor in the S.D. House.

“It was a highlight of my career,” said Soholt, who also serves as the director of women’s health at Avera. “Because of all of the roles that I have been in, including president of the Nurses Association, my primary fundamental reason was making sure we have the right people and the right mix to take care of the people of South Dakota. I understand how nurse practitioners and nurse midwives play such a huge role in that. Being able to do something on a professional level and be in a position of influence to be able to do that was really fun … controversial, but fun.”

Time for change

“The law for nurse practitioners and nurse midwives was enacted in 1979 using a joint-regulatory model that was appropriate for its time, but it was an outdated model in 2017 and inconsistent with the rest of the nation,” said Gloria Damgaard ’88 M.S., executive director of the South Dakota Board of Nursing. “South Dakota was only one of a handful of states, particularly among our surrounding states, that did not have an agreement model. It was not so much that there wasn’t respect for nurse practitioners and nurse midwives, it was just time to change the model.

“We had to be careful in participating in that effort. We needed to have support from the whole nursing community. It couldn’t be just the South Dakota Board of Nursing or the Nurse Practitioner Association of South Dakota, it had to be all of us. We were able to do that pretty effectively.”

Damgaard and Young both said creating the South Dakota Advanced Practice Registered Nurse Coalition was a key development.

“The coalition met weekly for a number of months to get everything prepared for that bill. Everyone left their egos at the door and worked toward the common goal,” Damgaard said. “We were fortunate to have a nurse who was willing to sponsor the bill—that was a tremendous advantage.

“Because of that coalition, we were able to reach out to ‘the house of nursing’ and get consensus,” she continued. “The time had come to update the practice act. We wanted to do things respectfully with the physician community, which had been instrumental in collaborating with nurse practitioners over the years. It had become difficult for nurse practitioners to find physicians who were willing to enter an agreement. We learned some nurse practitioners had to pay for an agreement, too.”

Rooks said the coalition was key in getting together all of the groups impacted by the bill.

“It helped link us with the movers and shakers in nursing in the state. I was privileged to be part of it, a small spoke in a large wheel,” said Rooks, who testified in committee. For her role in SB61 passing, Rooks received the American College of Nurse-Midwives’ Public Policy Award, which recognizes legislative, regulatory or health policy effort that furthered the profession of midwifery or has a significant impact on the practice of midwifery either nationally or locally.

Robin Arends, Nicole Gibson and Bryan Wermers were also recognized by the The Nurse Practitioner Association of South Dakota.

Bill’s impact

Damgaard and Young both felt the time was right to update the practice act, particularly due to the shortage of healthcare professionals in certain areas of the state.

“The Legislature felt it was about providing care for patients, especially for rural patients,” Young said. “With a lot of them coming from rural areas, they know the difficulty of getting quality providers to their constituents. With the goal of doing the right things for patients, you can see why it was truly effective.”

Damgaard agreed patients were the focus of the update but it was also a boost for nurse practitioners.

“We saw how it was a barrier to recruiting nurse practitioners to the state,” Damgaard said. “Part of our role in protecting the public is having the workforce available to meet their needs … getting quality providers to everyone in the state.”

“I can speak from the number of calls I’ve received from nurse practitioners now wanting to come to South Dakota,” Young said. “By removing that collaboration agreement, the new bill speaks to them as professionals. We’ve now captured their interest as a place to work.”

Rooks agreed.

“For a majority of advanced practice nurses in the state, it’s not going to change how we practice but it removes paperwork and bureaucracy. I know one midwife who was offered a permanent position in Pine Ridge but didn’t take it because of the restrictive law,” Rooks said. “I think it will also help the SDSU College of Nursing develop a better pool and wider range of preceptors and will also help in faculty recruitment.”

That’s just one of the newfound opportunities.

“I’ve said that we have to grow our own to keep providing access to health care in our rural communities,” said Esther Preszler ’88/’95 M.S., a family nurse practitioner in Roscoe. “Hopefully, we can provide enough of our own. I know I wouldn’t feel as committed if I didn’t have an investment in this community. That connection helps recruiting others. As we do that, this agreement opens many windows of opportunities for patients, ways we can greatly improve patient access to care.”

And all agree that was the key factor to starting the process to create SB61.

Matt Schmidt
College’s connection to policy changes

Since being named executive director of the South Dakota Board of Nursing in 2002, Gloria Damgaard ’88 M.S. claims to never being bored in the role.

Because of an interest in nursing regulation, she had been encouraged to get a board position, something she accomplished in the 1980s when Gov. Bill Janklow appointed her. She served as the nursing education specialist for 11 years and became the executive director in 2002.

“I can honestly say I’ve never been bored in this position; there is always something new to deal with on a day-to-day basis, always something to learn,” Damgaard said. “It’s been a tremendous way to learn and grow in the way of nursing regulation and public policy making.

“Busy lives

Damgaard and Linda Young ’87/’96 M.S. were at the forefront of the South Dakota Legislature passing SB61, which updated an agreement allowing nurse practitioners and nurse midwives to work without a written collaboration agreement with a physician. During their time on the board, the two have also conducted research and led a policy change on diabetes care in schools.

“What motivates me to keep doing quality work is the desire to help people in our state get the level of care they deserve and need,” said Young, a nursing program specialist with the South Dakota Board of Nursing and program director for the S.D. Center for Nursing Workforce.

“A high school counselor encouraged me to go into nursing instead of being a surgical technician, which was what I wanted to do,” Young continued. “I was told I could go into nursing and then go into the operating room. My brother is a civil engineer who graduated from State and my sister was in the pharmacy program so I also chose SDSU, which had a stellar nursing program then, too. I quickly learned the OR was not for me.”

Educated right

In a career that took Young from oncology to critical care and then into clinical nursing education and neonatal intensive care, her work with the South Dakota Board of Nursing allowed her learn...
its role with policy and how the board impacted public health.

“The board is responsible to make sure nurses are educated right and that nursing programs are meeting standards to produce a well-educated nurse,” Young said. “Our work insures standards are met to help patients receive safe nursing care. While we’re not at the bedside, we indirectly impact care of patients.”

**Nursing skills beneficial**

Both Damgaard and Young believe that having several nurses on staff with the South Dakota Board of Nursing is key, particularly with three of them having master’s degrees.

“We need those skills—which are the basis to perform the research, write the papers and grant proposals, and convene groups—to solve common issues and really try to help patients and others get access to quality providers,” Damgaard said. “Those results are a true testament to the education we received at State. The rigor of that program taught us how to synthesize and process information, skills that are really key to do quality work in this position.”

The two have had three articles published in the Journal of Nursing Regulation and led the way to enact a nurse licensure compact, a feature that would allow borderless health-care delivery.

“We’ve had the compact since 2001 but only 25 states were involved,” Damgaard said. “The state nursing boards have since got together to craft an enhanced compact. South Dakota was the first state and 25 others have enacted it, and others have legislation pending so we’re hoping we can see it go into effect in 2017.”

“We’re a really small office but with the help of our national organization, we got it done,” Young said. “I’m still really amazed how we get things done. Whether it’s the compact or SB61, our goal is to do the right thing for the right people. People are at the center for what we do.”

Matt Schmidt

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**Duo takes on tasks on many issues**

When presented with the issue of the state of South Dakota not having enough nurses to administer insulin to diabetic school-age children, Gloria Damgaard ’88 M.S. and Linda Young ’87/96 M.S. went to work.

“The American Diabetes Association was actively pushing for a bill to allow unlicensed providers to administer insulin in our state,” said Young, a nursing program specialist with the South Dakota Board of Nursing and program director for the South Dakota Center for Nursing Workforce. “Our nursing ‘house’ was divided so we agreed to study the subject.”

After writing a grant proposal, they set up a pilot study, Virtual Nursing Care for Children with Diabetes in the School Setting, which ran from Dec. 1, 2010, through May 31, 2013. The study had nurses train and work with unlicensed individuals, using telehealth technology, at select schools to administer insulin and delegate and supervise diabetes care tasks.

During the study, more than 5,500 insulin doses were administered. Surveys taken before and after implementation measured the perceptions of parents and school personnel regarding the safety and efficacy of the model of care. Statistical results showed large degrees of effectiveness.

**Create standards**

“We wrote a grant to the national council of state boards of nursing for funding of a research project, set up hubs in the two major hospitals in Sioux Falls and then oversaw the nurses training unlicensed individuals in the schools,” Young said.

“We worked with a team of nurses to create standards for implementation, and to develop a training program, standardized exams and a registry of trained unlicensed diabetes aides. What spoke to me was keeping the nurses engaged in the process.

“We needed to bring all of the stakeholders together to give us input on how to improve the care of children with diabetes,” she continued. “All of that information was key and instrumental in moving the policy forward. We were able to make policy decisions based on the evidence from the study.”

The two wrote three articles on the study, all published in the Journal of Nursing Regulation.

“The first one reported the results, the second was on the implementation of the new policy, and the third one was how we used an evidence-based model to make policy decisions,” said Damgaard, the executive director of the South Dakota Board of Nursing. “In case there comes a time when we might not have enough registered nurses to deliver health care, which I hope never happens, our study has shown how we can really add significant number of qualified people to our workforce.”

**Adaptable work**

Young hopes the model can work elsewhere.

“For example, the virtual nursing-care model could work in Hawaii, as you have people located on different islands, or in other states with large, sparsely populated areas,” she said.

“What really impacted me throughout the process was the calls I received from parents and families in regard to diabetes. Some of them had to drive a minimum of 20-30 miles to school to administer insulin because there wasn’t a nurse. We heard how school administrations didn’t have the finances for a school nurse,” she continued. “Those stories drove me to help them find solutions and think of it in terms of what would I want for my child, how can we get nurses there and if that’s not possible, what else could we do? Our goal is to really try to help patients and others get access to quality providers. We kept that our focus and did that in this case.”

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Gloria Damgaard ’88 M.S. and Linda Young ’87/96 M.S. (right) have led the South Dakota Board of Nursing for nearly two decades. Damgaard is the board’s executive director while Young is a nursing program specialist and the program director for the South Dakota Center for Nursing Workforce.
College’s connection to policy changes

Soholt’s drive helped lead Legislature pass Senate Bill 61

Deb Soholt ‘90 M.S. claims to have learned a lot from the game of football.

While she is known for her leadership roles in health care and the South Dakota State Legislature, she claims her drive comes from her father, Jerome Berg, a former college football coach.

Her father, who led Mayville State to eight consecutive winning seasons and five conference titles from 1958-65, used the GI Bill to go to college. After he earned a master’s degree, the World War II veteran started coaching at Mayville State.

“Because he knew what a college degree could do, he actively sought guys from the farm that were not going to college and say ‘I need you to come play football for me but I also want you to get an education,’” Soholt recalled. “They became this powerhouse, but his claim to fame was helping them in life—and they became successful in business, in politics, and one, a three-star general in the U.S. Marines—and he was a mentor who helped them get started. I grew up in that environment and think it had much to do with how I got my drive.”

That drive and a quest for learning put Soholt in leadership roles early in her nursing career.

“When I moved to South Dakota and started getting involved in the Nurses Association, I met some great people who mentored me, and ended up being on the board of directors and eventually president,” Soholt said. “It was through those experiences that I started testifying and influencing some bills in Pierre and realized that leadership, in large part, is about showing up. Nurses help people when they are truly vulnerable and have a voice that needs to be part of any public policy conversation. I also served on the South Dakota Board of Nursing, and was a part of developing statute that truly helps people. I became very tuned on to influencing public policy.”

Politics?

While her career path was rising, the thought about running for political office also arose. However, there were some challenges.

“Very early in my career I had a significant fear of public speaking, which I think would surprise many people,” she said. “I just knew that I had to punch through something so irrational, so I actively threw myself into speaking engagements and it was terrifying.

“There finally came a day when I was able to take all of my nervous energy and use it to my advantage,” Soholt continued. “Now I look forward to that and embrace it because it’s actually what helps me do a better job. It was something that I really had to work on.”

Between her work at Avera and with the South Dakota Nurses Association, Soholt found herself with various projects. She also volunteered on several political campaigns when someone approached her to run for the South Dakota State Legislature. However, she chose being fully present in her third child’s high school years over pursuing a political role.

“I just decided I couldn’t miss my daughter’s final chapter. It was a great decision because I would have missed so much by being in Pierre,” Soholt said. “I was on the (Sioux Falls) Chamber’s board of directors at that time, too. The chamber got me into an arena that was thinking about business and public safety and all these other things, which was such a fabulous opportunity. About the time I thought that political timing had passed me by, I got a call from Joni Cutler, the senator from my district, and she said ‘Deb, I decided to not run again. Now it’s your turn.’”

For Soholt, it was full steam ahead as the application deadline was within two weeks. She won both a primary and that general election and started in the South Dakota Senate in 2013.

“It’s been so satisfying, and I’ve been able to lead some things that will affect generations such as the Education Funding Reform Task Force. I feel so good about that work,” she said, noting she takes a leave of absence from Avera so she can focus on being an elected official. “I also led a large body of work called Jolene’s Law Task Force, regarding the prevention of child maltreatment. We developed the statewide Center for the Prevention of Child Maltreatment and delivered a comprehensive 10-year plan to the governor, which will change the trajectory forever. Can we save every kid? No. But can we make a monumental difference? Yes we can.”

Comes back to nursing

Serving as a sponsor for Senate Bill 61 was an opportunity for Soholt to reconnect with numerous leaders in the field of nursing.

“South Dakotans are fortunate to have someone with Deb’s competent skill set representing them,” said Dean Emerita Roberta Olson. “She is a leader in the profession of nursing and now in the South Dakota Legislature. I thank her for her effective leadership in all that she does.”

In addition to Olson, Soholt worked with others in what some have called “the house of nursing.”

“The interesting thing is we’ve all worked together throughout the years, so we had no issues to figure out—the trust was in the room,” she said. “We could share the truth and could quickly get to what we
needed to do. When somebody said ‘I’m on it,’ they just did it and you could just trust that it was done at the highest professional level.

“We wouldn’t have been ready to do this 10 or 15 years ago because there was the need for unequivocal proof those roles are able to handle their responsibilities within their scope of practice,” Soholt continued. “To assure that the quality does exist is a huge responsibility on the house of nursing.

“My nursing background helps me understand the need for access to health care, and being chair of the Senate Health Committee puts me in a position to do something about it. If people are struggling for access, especially in the western part of our state, I go right back to being a caregiver because I understand that struggle and vulnerability. I try to understand what the people are trying to say in order to craft policy. The fundamental reason, to me, was to make sure we have the right people and right mix to take care of South Dakotans. It’s an amazing privilege to serve South Dakota.”

Matt Schmidt

Berkland helps guide Sanford Health

Now working as Sanford Health’s vice president, nursing and clinical services, Diana Berkland ’72/’94 M.S./’14 Ph.D. has pretty much seen it all in the field of nursing. She’s worked as a clinical nurse specialist, nurse practitioner and now is a health-care executive.

“I practiced as a nurse practitioner for a few years prior to being invited to consider an executive position at Sanford. That was a hard decision for me because I loved the work of nursing and my work at the bedside, so that was probably the hardest decision I’ve ever had to make,” she said. “I feel that I’ve been able to create an environment where we deliver outstanding patient care and an outstanding patient experience for the patients and families that we’ve been called to serve as health-care professionals.”

Part of that experience involves an interdisciplinary team that includes nurses, physicians, pharmacists and individuals in physical and occupational therapy, to name a few of the participants.

Berkland admits she’s no longer an expert in clinical care but rather works as a conduit to form high-performing teams of experts.

“I became a catalyst for the conversation and, in fact, I’m doing that today throughout Sanford,” she said. “I’m doing that by hosting conversations every single day across all regions where we have nurses, physicians, pharmacists and other therapists who come together. We’re influencing clinical practice by focusing on best practices and rolling that out across the entire footprint of Sanford.

“I would say that one of my greatest strengths is that I’ve spent so much time at the bedside, as well as the time I spent in hospital operations. That experience gives me insights that I probably wouldn’t have, had I not lived that,” Berkland continued. “Some of the things I learned through my formal and informal education are how to phrase things differently to bring people together, how to withhold judgment but listen with a willingness to be influenced and recognize that not being the expert in everything isn’t a bad thing—really rely on your team to bring all that together.

Berkland served on the South Dakota Board of Nursing for more than 10 years and was its president for three. She said that service helped her career, not only as a bedside nurse, but also in her current role.

“If there’s anything I’ve learned early on in my professional career, it’s how important it is to establish trustful relationships,” she said. “Once you have the trust and respect of a group of people, it really serves everyone, and I think all boats rise. I think that’s what we’ve done in nursing in the state of South Dakota, and that’s really attributed to a number of nursing leaders in the state.”

Matt Schmidt
To get a firsthand look at the impact of federal policy on nursing, Tamara Keefner and Angela (Ela) Nielsen accompanied Dean Nancy Fahrenwald to the American Association of Colleges of Nursing Student Policy Summit in Washington, D.C. Keefner, a graduate student, and Nielsen, a May graduate, were chosen after submitting letters describing why they wished to attend the event and share what they learned at the three-day conference of didactic program sessions focused on the federal policy process and nursing’s role in professional advocacy.

“I wanted to attend the summit because, as a student member, I wanted to learn about the AACN and what I could do to become a more active member,” Keefner said. “I also wanted to learn more about health policies and how research influences policy. I am always looking for new opportunities to learn more about my profession and ways to advocate for nurses and the health of our nation.

“I came home with an enriched respect for my profession and school,” she continued. “I heard from experts who have firsthand experience in affecting change through their research. I now have a different perspective of how research can make a difference in a broader context.”

Keefner did not know what to expect from the event nor her first trip to Washington, D.C.

“The AACN did help prepare us prior via webinars with a civics refresher and discussions on what to expect from the summit. However, I don’t think anything could have prepared me for this,” she said. “It was amazing how much I learned, and I met some great people who share the same passion for nursing and are affecting positive change. I met graduate and undergraduate nursing students from across the country. I made some great connections and friends. There were 198 students, representing 92 schools in 38 states in attendance.

Everyone was so friendly and excited to share ideas and visions for the future of nursing and the work they are doing in their graduate programs. I learned so much with the time I had visiting with the other students in attendance regarding issues other states are facing for advanced practice nurses.”

In addition to hearing from Linda McConnell, chief nursing officer of the Veterans Health Administration, and Dr. Patricia Grady, director of the National Institute of Nursing Research, Keefner, Nielsen and Fahrenwald visited the offices of Sen. John Thune and Rep. Kristi Noem.

“The goal was to distribute the same message, to reauthorize Title VIII and explain how that funding addresses the nursing and faculty shortage to as many congressional representatives as possible,” Keefner said. “Dean Fahrenwald did most of the talking because she knew the details. She talked about how important Title VIII is to our school,” Keefner continued. “It was great to see her in action, and I learned more about our school while listening to her. I was in awe of our great leader.

“I had the opportunity to share how this program has made it possible for me to further my education in the Ph.D. program,” she continued. “I discussed my plans to someday join in educating future nurses and talked about my research interests in mental health and the great need in our state.”

State has used Title VIII grant funding to buy video equipment for telehealth education in the nurse practitioner and doctor of nursing practice programs. SDSU also uses those funds for the nurse faculty loan program (NFLP).

“For more than 50 years, Title VIII of the Public Health Service Act has helped meet the nation’s demand for nursing services. These programs address all aspects of nursing education, practice, recruitment and retention—focusing on meeting the needs of rural and underserved communities,” Keefner said. “The loss
of funding for these programs would greatly affect health care in the state of South Dakota and many programs that help the College of Nursing train nurses at all levels; including students like me who would not be able to pursue advanced education without the help of the NFLP.

“I was able to see firsthand how policy affects all aspects of nursing practice, including education,” she continued. “As nurses, educators and scientists, we have the power to influence policy and practice. To do this, we must stay abreast of current policy and legislative actions. Being an active member of professional organizations increases the power of the nurse voice. I strongly encourage and recommend becoming a member and being active in one or more of the many organizations for nursing and advocate for our profession and the communities we serve.”

Matt Schmidt

Despite working more than 20 years as a dental hygienist, Tamara Keefner always had the idea she would return to college.

“Originally, I thought about continuing my education and going into the DNP program,” said Keefner, who is from Rapid City and attends classes at the South Dakota State University College of Nursing’s West River Department. “I never once considered getting my Ph.D.; I didn’t think that was within my reach or interests at all. As I went through the program, I became very intrigued by research and teaching—that became what I wanted to do.”

Thanks to the Nurse Faculty Loan Program, she is now pursuing that doctorate. The NFLP is aimed at graduate students who want to become nurse educators and teach in an accredited school or college of nursing after graduation. For every year one teaches in the first four years following graduation, a portion of the loan will be forgiven. Recipients have 20 percent each of the first three years forgiven and 25 percent the fourth year, leaving the student with 15 percent of the loan amount to pay.

Keefner is one of approximately 60 SDSU College of Nursing graduate students who are or have taken advantage of the NFLP since SDSU initially received the funding in 2005.

“The NFLP loan program is a win-win for students and the nursing profession,” said Mary Minton, the college’s associate dean for graduate nursing. “The students receive financial assistance while the nursing profession is proactively addressing the shortage of educators by ensuring teaching commitment from emerging new faculty.”

Keefner, who has been a temporary clinical assistant since 2014, plans to graduate in December 2018 and seek a faculty position.

“There’s a huge nursing shortage in the nation because a lot of highly qualified nursing school applicants are turned away due to not enough faculty to teach them. That was one of the factors that helped pull me into education. That and the fact I enjoy teaching,” she said. “It’s been stressful and rigorous, but if you want it bad enough, it’s within reach. Knowing the NFLP is there takes away a lot of the extra stress.

“If anyone is looking at furthering their nursing education and worried about how to finance it, the NFLP is an easy answer,” Keefner continued. “If it’s a dream, a passion or something you’ve always wanted to do, I’d encourage one to do it.”

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under E10HP28782: Nurse Faculty Loan Program, $168,713.

Matt Schmidt

NFLP helps Keefner make transition

Tamara Keefner is one of nearly 60 College of Nursing students who are taking advantage of the Nurse Faculty Loan Program. She is now pursuing a doctorate and hopes to become a faculty member after graduation.
College’s connection to policy changes

Research effort looks at tobacco-free policies for S.D. health-care facilities

Electronic health record systems prompt the nurse to ask each patient about tobacco use.
Tobacco use and health-care facilities should be an oil-and-water situation, but the devil is in the details, like who enforces the policy and what about non-employee use?

Two members of the College of Nursing surveyed a broad range of South Dakota health facilities to learn which facilities had tobacco-free policies in effect and then offer suggestions. The South Dakota Department of Health, in turn, used the assessment to create a three-page model policy, which facilities could easily adapt as their own and receive a 100 percent compliance rating.

Heidi Mennenga, an associate professor, and Jennifer Kerkvliet, a research associate II in graduate nursing, undertook the one-year project after receiving a $50,000 grant from the Department of Health in April 2015.

Surveys were sent to 420 facilities, including clinics, hospitals, Women, Infants and Children (WIC) and family planning centers, mental health and substance abuse treatment facilities and cancer centers. Each facility was asked to provide a tobacco-free or smoke-free policy and answer questions about tobacco-use assessment and referral procedures for patients.

Mennenga said 96 percent of the 366 responding facilities had tobacco-free policies and 348 provided a copy, which was reviewed in four areas—policy communication, environment, cessation and enforcement.

The study looked at the facilities’ written policies and offered recommendations to gain 100 percent compliance. Hospitals, clinics and cancer treatment centers were among the facilities with more comprehensive policies, all scoring above 60 percent. At the low end were mental health and substance abuse treatment facilities, which mirrors the national trend, Mennenga noted.

The Department of Health has made those facilities a target area, Kerkvliet said.

One area reviewed, which often hindered a high compliance rating, was enforcement. “Enforcement was a huge component. Whose job is it? And whose job is it when it’s an employee? When it’s a patient? When it’s a visitor?” Mennenga said. Follow-up phone interviews were done with 11 selected facility administrators. Enforcement was a common issue, particularly how to handle visitors, she said.

The model policy addressed visitor enforcement, stating employees are asked to politely explain the policy and, if the visitor refuses, the employee should contact an appropriate official within the facility.

The interviews also brought to light an unintended consequence of tobacco-free policies. “If a (health-care facility) campus bans smoking, it just pushes those patients and staff to the surrounding area, which the neighbors don’t like,” Mennenga said. This illustrated how “the conversation needs to be a wider discussion about how do we decrease tobacco use as a whole,” she said.

A common weakness among the policies studied was providing cessation services. The researchers found 77 percent of the facilities with electronic health record systems integrated prompts, or reminders to providers to assess patients’ tobacco use. “Among those facilities without electronic health records, only 45 percent had a tobacco cessation section in their intake process,” Kerkvliet said.

Fortunately, the South Dakota QuitLine provides an accessible, convenient tobacco cessation program for those facilities without cessation resources onsite, she said.

QuitLine a key to cessation effort

The model policy shares various resources, including the QuitLine’s toll-free number, 1-866-737-8487, and website, www.sdquitline.com.

The researchers didn’t focus on compliance with the policy. “We hope to secure future funding to conduct a follow-up study on the impact of providing feedback to the health-care facilities or to further examine cessation services and policy enforcement within health-care facilities,” Kerkvliet said.

Dave Graves and Christie Delfanian

CHANGE IN SDSU TOBACCO POLICY

The SDSU Health Coalition played a key role in the university’s recent adoption of a smoke-and tobacco-free policy. Its efforts will be detailed in an upcoming article.

NOTE: The South Dakota Department of Health model policy is available at goodandhealthysd.org/healthcare/practice-guidelines
A social media campaign has successfully engaged South Dakota Native Americans to increase their knowledge about living kidney donation. “The living kidney donation social media campaign builds connections among Native Americans dealing with kidney failure and helps educate them and their families about available options,” said Nancy Fahrenwald, dean of the College of Nursing. The campaign, which uses Facebook and Twitter, is aimed at helping Native Americans on dialysis make informed decisions, which can include seeking a kidney transplant from a living donor.

Brian Britt and Rebecca Britt, assistant professors in the Department of Journalism and Mass Communication, and Jennifer Anderson, an assistant professor in the Department of Communication Studies, received $99,974 of the SDSU sub-award to develop the social media campaign. They collaborated with Fahrenwald and nursing research coordinator Shana Harming and began work on the project in 2016. Fahrenwald is principal investigator of a larger research project to educate Native Americans about living kidney donation through a five-year $1.32 million sub-award from the National Institute on Minority Health and Disparities grant that created the Collaborative Research Center for American Indian Health.
Social media campaign development
Fahrenwald and Harming provided cultural perspectives and shared educational materials, including a brochure and video that they developed and tested during the project’s first three years.

Anderson led the training of dialysis unit staff members, who then interviewed Native Americans on dialysis who had previously participated in the project. Their feedback helped the researchers select the most impactful content for the social media campaign. “It gave us a jumping off point,” Brian Britt said.

The campaign, which launched in November 2016, has been successful in the state, according to Rebecca Britt, who created the social media campaign materials based on the original brochure and video. She used video clips, graphics and text to create posts that shared information on organ donation and transplantation. That content included personal stories from Native Americans who received a living kidney donation or were on dialysis as well as those who donated a kidney to a loved one.

“We wanted to make sure the materials represented the Native American community in a way that is respectful and culturally appropriate,” said Rebecca Britt.

The Facebook page, Native Americans Sharing Hope and Healing through Living Kidney Donation, has seen high engagement levels. Some posts garnered more than 500 views and several reached as many as 4,000 views, likes and clicks, according to Brian Britt, who conceptualized and led the social media project. He analyzed how the community developed around the campaign. “I was essentially looking for those people who emerged as opinion leaders.”

Health campaigns typically identify opinion leaders in advance and then engage them to spread their messages. “In our case, that wouldn’t have worked,” said Brian Britt, since the most influential members of the Native American community were not necessarily active social media users. Instead, he identified emergent opinion leaders and worked with them as the campaign progressed.

“As a result of this approach, we were able to successfully engage with tribal community members through the social media campaign,” Rebecca Britt said. The South Dakota Department of Health has promoted the campaign, along with other organ donation campaigns via social media.

The social media campaign’s success has led the researchers to set the bar higher “We were very fast and efficient — and now we want to target a national audience,” she added.

Engaging national audience
“This is a great way to educate the public, especially young people,” Harming said. “Social media is limitless for its reach. It’s definitely the future.”

Rebecca Britt said, “We want to build on this momentum in future campaigns.” That means reaching Native American audiences across the nation and including information for families and friends who are potential donors.

“In a lot of cases, the donor is going to the family member or loved one with kidney failure and saying ‘I want to do this for you; I want to donate my kidney;’” Harming pointed out. In addition, the researchers want to add information on preventing kidney failure. “It’s a need we are being asked to fill,” said Harming.

“The opportunity to extend those connections to Native Americans nationwide is testament to the high-caliber work that our communications researchers have done,” Fahrenwald said.

Christie Delfanian
Empowering students. That’s one of the goals Bev Warne has for students in the College of Nursing. Three of the college’s students got to experience that feeling of confidence.

Initially, Amber Brown, Kimimila Cutschall and Heather Giago thought they would be attending the National Alaska Native American Indian Nurses Association conference in St. Paul, Minnesota. Little did they know they would be presenting.

That tidbit was something Warne, a program coordinator and adviser at the College of Nursing’s West River Department, would reveal later.

“I had no idea what it was going to be,” Brown said. “I thought we were going to have a poster and talk to people about it. Bev later said, ‘No, you’re actually going to have to get up in front of people and tell them your story.’”

Brown and Cutschall wrote papers to prepare themselves for the conference. Giago did not.

“Each of us had different experiences and was able to speak of the assistance that Rebecca (Leslie) and Bev offered us. When I shared my story, I spoke from my heart and my experience. I didn’t mean to make people cry,” Giago said. “When I looked over at Bev, she’s crying. I then looked at my classmates, and they had tears in their eyes. When I looked out to the audience, they were crying and sniffing. It was the first speech I’ve ever done that I felt confident doing.”

One of the audience members touched to tears was Anna Atteberry-Gustafson, who works as the college’s assistant director of nursing student services. She was representing the college for recruiting and marketing efforts.

“While the students were speaking and sharing their stories, you could hear a pin drop in the room. It was just that quiet and everyone was so attentive to what was being said; I think they were just hanging on every word,” she said. “It really touched my husband, John, and it touched everyone in

Students share college stories at national conference
that room ... everyone. It was amazing and I
know about the Wokunze Wicaske Alliance.
You know how it is, you have to hear the
story before it finally makes an impact.”

Warne, who provided an introduction
to the students’ talks, believed the students’
stories would capture the audience’s
attention.

“I sat there like a proud parent because
I think of them as my children, though they
could be my grandchildren,” Warne said.
“I watched them and thought, ‘I knew they
could do this.’ I knew they would have an
impact because of who they are.

“I try to teach them to be proud of who
they are as Native women,” she continued.
“I do that by being with them and talking
about the strength and resiliency of our
people in history, and they went through
a lot more than we ever will and that’s why
we’re here.”

Did not start in nursing

Giago started pursuing a career as a
dental hygienist but was dismissed from
school three months before graduation.
“I was the only Native American
student there,” Giago said. “The other
students didn’t speak to me. I was eliminated
from study groups, and the faculty wasn’t
very supportive.”

When she got the idea to pursue a
degree in nursing, someone suggested Giago
contact Warne.

“Walking into Bev’s office was probably
the most rewarding opportunity I’ve ever
taken in my life. It was welcoming, she was
very proud of what she’s put into her office
and the outreach program. My thoughts
were ‘this is where I want to be,’” she said.
“I’ve never felt wanted at a college before.
Someone actually took interest in me. She
told me about the different events she does
with the community, and how they involved
the nursing students. She had me; had me at
hello. That visit changed my life; I’m not
exaggerating; that’s the truth. She changed
my outlook.”

Giago started classes in January 2017
and wants to help other students earn a
degree in nursing.

“I’m helping other potential nurses,” she
said. “I’ll help you fill out your application. I
can help, just like how Amber and Kimimila
are helping me.”

Like Giago, Brown started in another
major. When her son, Noah, was born, he
spent one month in the neonatal intensive
care unit.

“That’s when I decided that I wanted to
be a nurse,” she said. “The level of care, the
compassion and just the love those nurses
had for my son even though he wasn’t their
child was just amazing to me. I just thought,
‘I could totally do that.’ It just touched my
heart, and I switched majors.

“Without Bev, I don’t know where
I’d be,” Brown continued. “I was trying
to juggle working, my kids and going full
time to school. It was just so overwhelming
and stressful. I felt like a failure as a mom
because I didn’t have enough time. Bev’s the
perfect idea of what a mentor should be. She
calls us, she texts ... ‘Hey, how are you doing?
Do you need anything? If so, we can figure
it out.’ She really pulls for us.”

Cutschall agrees and hopes Warne, who
has been a nurse for nearly 60 years, does
not plan on retiring.

“Bev has been like an unci (Lakota
for grandmother) to me and my daughter.
I can’t thank her enough for all of her help
and encouragement,” she said.

“The conference was awe-inspiring,
uplifting and knowledgeable,” Cutschall
continued. “Meeting the men and women
who came and represented their fields of
experience and to realize I could be one of
them one day planted a seed of inspiration
for me to never stop learning.”

Matt Schmidt

Opposite page: From left, Bev Warne, student Crystal Clark,
Heather Giago, Cassi Severson and Tina McFadden gather for
a picture when recalling the National Alaska Native American
Indian Nurses Association conference in St. Paul, Minnesota.
Giago was one of the students who presented. Amber Brown
and Kimimila Cutschall also presented.

Above: Warne and Amber Brown reminisce about the
students’ presentation at NANAINA.

Below: Giago, Brown, Cutschall and Warne gather for a
picture before the students’ presentation at NANAINA.
For her efforts helping provide scholarships to students of South Dakota State University’s College of Nursing, Carmen Hansen has been named the college’s distinguished service award recipient. Hansen recently retired as the John T. Vucurevich Foundation’s program officer.

The award, which was first given to R. Esther Erickson in 1980, recognizes an individual who has made a significant contribution to the improvement of health care and overall quality of life or to the advancement of the South Dakota State University College of Nursing.

“Carmen’s willingness to champion funding requests to the foundation board allowed our college to offer financial support to students in need of assistance,” Assistant Dean Barbara Hobbs said. “As a result of her efforts, students have received a college degree with less financial burden. As the John T. Vucurevich Foundation program officer, Carmen contributed to the success of the College of Nursing’s West River Department’s students and faculty. Without her efforts, some students would not have been able to achieve their dreams of a college education.”

Hansen recalled Hobbs stopping by to talk about what made the SDSU College of Nursing different from other nursing programs.

“When the board members looked at the West River department, they felt it was a good fit as it was developing more nurses, which was needed, especially in our area,” Hansen said. “However, individuals weren’t going into the nursing program because it’s an expensive degree, more so than other degrees. Knowing that also played a role in the board’s decision to help provide scholarships.

“John (Vucurevich) always admired individuals who went into the nursing field—it’s a very selfless career and there are so many opportunities for students,” she continued. “The jobs are there. The opportunities, the education and the advancement of that individual ... it’s a good thing.”

Despite her relationship with the college and the West River department, Hansen did not expect to receive a call from Hobbs announcing she would receive an award.

“I was extremely honored and surprised. Again, I’m not the one who awarded the scholarships; I’m the one who did the research so the board had the full story to make a decision. I’m very humbled by it,” she said. “It’s been a joy developing and nurturing the relationship with Barb and the West River Nursing Department.

“SDSU is very supportive of all of its students. Every student in college goes through struggles and wonders whether or not they can do this and have confidence in themselves. I think Barb Hobbs and her staff gives that confidence to the students,” Hansen recalled. “And if they have issues that come up, they’re there to help support in any way they can — and one of those ways is scholarships. The foundation always felt funding nursing scholarships for Western South Dakota was very important and I’m honored to be part of it.”

Matt Schmidt

Carmen Hansen, left, former program officer for the John T. Vucurevich Foundation, received the college’s distinguished service award from Barb Hobbs, assistant dean.
Developing rural providers

As part of its continuing efforts to address rural health care in the state and region, the College of Nursing recently received a two-year grant for more than $1.3 million from the U.S. Department of Health and Human Services.

The college will use the funds to develop immersive clinical traineeships in rural and/or underserved primary-care settings. To help create these opportunities, the College of Nursing has partnered with Sanford Health to recruit, engage and develop new clinical preceptors and practicum sites, and design innovative skills workshops with the Sanford mobile simulation unit.

The grant will cover tuition, fees, books and a stipend for up to 16 family nurse practitioner students each year. Those students must be enrolled full time and in one of three practicum courses, and agree to a longitudinal clinical training experience in a rural and/or underserved setting.

“This project is intentionally designed to address the gap in primary-care providers for rural and underserved areas, by providing education and clinical experiences for our family nurse practitioner students that focuses on the unique role and skill set of the rural provider,” said Assistant Professor Victoria Britson, principal investigator of the grant. “We’re looking for our graduates to be more comfortable with the higher level of care often expected of them in a rural area.

“The selected students will have an immersion clinical experience with a preceptor. That experience will help them learn what it means to be a rural provider,” she continued.

The U.S. Department of Health and Human Services’ Health Resources and Services Administration has designated 44 of South Dakota’s 66 counties as health professional shortage areas.

“This project will strengthen the quality of advanced practice nursing education by intentionally focusing on rural and/or underserved populations, ultimately improving access to care and patient outcomes for these populations in South Dakota and the region,” said Nancy Fahrenwald, the college’s dean.

“The benefits of this project will be fully realized when the graduates are connected with employment opportunities throughout the region,” said Mona Hohman, vice president of nursing and clinical services for Sanford Health. “Sanford is proud to serve rural locations, and we know that the graduates can have long, fulfilling careers serving the health needs of rural communities.”

Additionally, the innovative approach will place family nurse practitioner students in rural locations for the majority of their clinical education experiences.

“Traditional education has left many recent graduates feeling less confident when faced with emergency department, hospital rounding or long-term care facility work,” said Hohman. “This important clinical-academic partnership and rural immersion experience will give them a new level of experience and, in the end, make them better prepared to serve the vast health needs of rural areas.”

Matt Schmidt

The Nurse Practitioner Association of South Dakota honored Nicole Gibson ’00/’05 M.S./’14 DNP, Robin Arends ’08 M.S./’14 DNP and Bryan Wermers ’00 for their roles in passing Session Bill 61. Arends and Gibson are clinical assistant professors at the college’s Sioux Falls site while Wermers is an associate professor at the University of Sioux Falls.
Changes
Burdette and Horsley named assistant deans

Nancy Fahrenwald, dean of the College of Nursing, announced the hiring of Leann Horsley as an assistant dean and the promotion of Linda Burdette to be an assistant dean. Horsley will work primarily at the college’s site in Sioux Falls, while Burdette will work primarily at the college’s site in Aberdeen.

In addition, assistant professor Christina Plemmons has been promoted to a new administrative role at the college’s West River Department site in Rapid City. Plemmons will also be the director of Academic Nursing Education.

Burdette, who previously served as the Aberdeen site coordinator, and Horsley will oversee several faculty members and provide leadership for their sites.

Horsley

“We are looking forward to Leann making her mark on the Sioux Falls program,” Fahrenwald said. “Her work in simulation, interprofessional education and creating professional development opportunities at Loyola really caught the attention of the hiring committee. In addition, she has research experience and is a national leader in clinical simulation.”

Horsley previously worked as an assistant professor at the Loyola University Chicago Marcella Niehoff School of Nursing. She earned her bachelor’s and master’s degrees at the University of Oklahoma and her doctorate from the University of Kansas.

“I would like to use my role to not only impact our students, but also to strengthen our partnerships in the Sioux Falls area,” Horsley said. “We are charged with producing safe, competent and professional nurses. We want to empower each nurse to grow into a nurse leader, who increases their score of influence within the local area, state, region and nation.”

Horsley is a certified health-care simulation educator, certified nurse educator, TeamSTEPPS master trainer and a previous scholar in the Sigma Theta Tau International Nurse Faculty Leadership Academy. She is the lead nurse planner for the International Nursing Association for Clinical Simulation and Learning, where she ensures all of the education provided by the organization meets the requirements set forth by the American Nurses Credentialing Center.

“Simulation is a safe learning environment for participants that mimics reality,” Horsley said. “We’re finding that students as well as health-care providers who have been providers for a long time can benefit from participating in simulations. We’re improving patient safety and outcomes by increasing the knowledge and team performance of participants and advancing the science of simulation.”

Burdette

Burdette ‘84/’88 M.S./’93 FNP/’10 Ph.D., an associate professor, will devote most of her time overseeing the Aberdeen site but will also have duties in classroom instruction and research.

“Linda has been an outstanding member of our team having served as the Aberdeen site coordinator,” Fahrenwald said. “This promotion takes into consideration her relationship with the students, faculty members and other stakeholders in our accelerated program. It’s a unique program, and we look to expand our graduate programs to the Aberdeen area.”

Burdette has been with the College of Nursing since 2011. Her nursing career has included roles as patient educator, nurse educator, occupational health nurse practitioner and wound care nurse. Her research focuses on rural nursing, self-care, nutrition and physical activity environments related to health promotion/disease prevention and evaluation research.

“I look forward to continuing to further develop the Aberdeen Accelerated program and expand the nursing graduate options in Aberdeen,” Burdette said. “The program’s
South Dakota State University’s Brandon Varilek has been named to the Graduate Nursing Student Academy Leadership Council.

The Leadership Council consists of 10 graduate nursing student members who will serve a two-year term to help shape the formation of the GNSA and provide direction on what programs, services and resources should be developed to meet the needs of nursing students in master’s and doctoral degree programs.

Varilek was named a GNSA liaison in 2016. In that role, he is the primary contact for State and serves in a leadership capacity by distributing information to his fellow students.

“It is an honor to be selected to serve on the leadership council,” said Varilek, who completed his third year pursuing a doctor of philosophy degree in nursing. “Serving on the leadership council will impact both my college and professional careers. I will be working directly with the AACN for the next two years on the leadership council.

“My new role gives SDSU a strong voice at the national level, and my fellow graduate students will further benefit from a deeper knowledge of what the GNSA is and what it has to offer,” he continued. “At the professional level, I will gain valuable leadership experience that I will be able to carry through to my future positions after graduation.”

Varilek, who plans to complete his degree in 2019, would like to become a faculty member at a university. He plans to pursue a position that would allow him to be in the classroom and conduct research in palliative care. Varilek, a registered nurse, currently works full time at Avera McKennan as a solid organ transplant coordinator.

“Matt Schmidt

Matt Schmidt
Mary Moller’s career in nursing started as a candy striper while in high school.

While she admitted she liked the uniforms and being part of the Future Nurses of America Club in high school, Moller’s original plan was to be a flight attendant.

“At that time, if you wanted to be a flight attendant, you had to be a nurse,” Moller said, noting nursing was always part of her career plan as her mother, Shirley, and other family members were nurses.

“I wanted to do a lot of travel. However, they changed the rule so one didn’t have to be a nurse. I didn’t think of anything different than being a nurse.”

Moller, an associate professor at Pacific Lutheran University’s School of Nursing, delivered the 2017 College of Nursing Deans’ Distinguished Lecture. Her lecture, “There is No Health Without Mental Health: Our Nation in Crisis” was March 30.

“When I think of psychiatric nursing, I think of Mary Moller,” said Kay Foland, a professor in the college’s West River Department. “She’s a phenomenal speaker who has a background in research and teaching and is a former president of the American Psychiatric Nurses Association. She’ll be a great resource for all of us.”

The talk at South Dakota State added to her list of more than 1,000 professional and research presentations in all 50 states and several nations. Not a bad travel career despite not being flight attendant.

After earning her bachelor’s degree in nursing, Moller worked as a staff nurse before adding a master’s degree and finding herself in front of the classroom.

“I always liked teaching,” she said. “I got recruited by one of the nursing faculty who said, ‘why don’t you teach? I think you’d be good at it,’” she said.

“My career has been responding to what people have asked me to do. I’ve never had a five-year plan in my life.”

She did think of being a midwife but was asked to teach a psychiatric course by Ellen McGovern, the same person who recruited her into teaching.

“I had been teaching neurological nursing in a rehab hospital and ended up teaching psychiatric nursing at a 250-bed county psychiatric hospital,” Moller said. “I quickly realized I was seeing 250 of the most neurologically impaired people I’d ever seen. I was absolutely appalled how they were being cared for ... because they weren’t; they were being warehoused.

“They needed rehabilitation, and I started giving the only kind of nursing I knew—rehabilitation nursing. I was doing psychiatric rehabilitation before it was named a specialty,” she continued. “I fell in love with psychiatric nursing because the patients got better. With a rehabilitation approach, there weren’t as many combative incidents, they slept through the night ... I realized I was as guilty of as much stigma toward psychiatry as anyone else. I vowed then I’d spend my career combating those attitudes and teaching that the brain is part of the body, too.”

One thing Moller has learned since is “people with mental illness hate having the diagnosis just as much of the rest of society views it. People get confused between mental-health needs and psychiatric illness—everyone on earth has mental-health needs, but thank heaven not everyone has a mental illness,” said Moller, who earned a doctor of nursing practice in 2006, and is also the director of psychiatric services at the Northwest Center of Integrated Health.

“People need to remember that people with mental illness are people first,” she said. “The brain is an organ and just like any other organ; it can be stabilized, it can be repaired.

“I made a commitment I’d go to my grave trying to remove the stigma associated with mental illness, and I do that by teaching and lecturing to anyone who will listen in any venue,” Moller continued. “I try to help people understand mental illness is not because a person has a weak will or character flaw; these are serious, lethal brain disorders.”

Mary Moller, an associate professor at Pacific Lutheran University’s School of Nursing
# Calendar of events

**DECEMBER**
- 1 West River Pinning Ceremony
- 8 Brookings Pinning and Hooding Ceremony
- 14 Aberdeen Pinning Ceremony

**2018**
**JANUARY**
- 8 Brookings Spring White Coat Ceremony
- 9 Sioux Falls Standard White Coat Ceremony
- 16 Aberdeen White Coat Ceremony

**MARCH**
- 28 West River Sigma Theta Tau Induction

**APRIL**
- 5 Deans’ Distinguished Lecture, Brookings
- 5 Brookings Sigma Theta Tau Induction
- 6 Research Day, Sioux Falls

**MAY**
- 3 West River Pinning and Hooding Ceremony
- 4 Brookings Pinning and Hooding Ceremony

For more events, visit: https://www.sdstate.edu/events?department=43751

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**South Dakota State University**
Cristina Stuefen’s start in college had her pursuing a major in English literature. However, she did not stay in that area long.

Stuefen found her way to enroll in the College of Nursing after seeing her father be critically injured while deployed to Iraq.

“Seeing how he was treated during his hospitalization and rehab drew me toward nursing,” said Stuefen, who completed her bachelor’s degree in 2008.

She’s still attracted to helping others, which is why she completed her master’s degree in May and is now pursuing a doctorate from the University of Arizona. Stuefen is one of two incoming Robert Wood Johnson Foundation Future of Nursing Scholars.

Her progress is a major change from when she cried after taking her national licensing exam, fearing she failed. She did not.

“I wanted to do something to support my family and have it be something I’d enjoy,” Stuefen said, noting she and her husband had two children when she chose to major in nursing. They now have four children. “I was able to develop great relationships with people in my class and some amazing professors I still keep in touch with.”

Two of those professors, Lois Tschetter and Tom Stenvig, were not surprised by Stuefen’s pursuit of a doctorate.

“The thing about education is that I never would say ‘I would never imagine that,’” Stenvig said. “I’ve had more than one student, who years later will say, ‘by the way, when we had that discussion, it changed my life; it changed my career.’ We’ve probably all had experiences like that, where someone has made a lasting impression. To see Cristina pursue a Ph.D. this early in her career, I’m surprised and delighted. I’m very, very happy for her.

The sooner she can get her Ph.D., the greater her contributions can be for health care.

“Somehow, my experience from being a retired public health officer (Indian Health Services) came out one day and Cristina was interested in that. There have been different students who ask a few questions and some who are more intent, and she was definitely intent,” he continued. “She asked ‘Can I work in this area?’ I said probably not as a new grad because they want one to have experience; and even then, getting hired to work in the Indian health-care program is no small feat in itself. However, Cristina found a place (Fort Defiance) that would take her as a new grad.”

Tschetter also recalls that determination.

“Cristina’s career just took off right out of the blocks, and she got herself in position for leadership roles,” Tschetter said. “I don’t think it ever occurred to her that she had only graduated a few years ago or was only in a position a little while; she took advantage of every opportunity that came open and stepped up.

“I think some of it is due to the exposure she got here—thinking she can do this, do this and do this,” she continued. “I’m sure she never thought twice about applying for graduate school or the Robert Wood Johnson Foundation Scholarship, and why not? She’s proven what she can do.”

While Stuefen admits she loves her job, a three-week health boot camp in Berkeley, California, introduced her to the specialty of global health. That got her thinking about what she could do on the Navajo nation and to pursue her dream of earning a doctorate.

“I’ve always thought about the why of health care,” Stuefen said. “That made me think why are things this way? What are the social determinants of health? And the same for social justice issues ... they are health issues.

“That drove me to more questions,” she continued. “We can do a lot more in nursing. Nurses are in a key position to affect change. We can affect change due to population health. We are in a position of privilege and can adjust social issues, which will change health. We need to address health disparity from an asset-based approach and build on that rather than address deficits.”

That is one of Stuefen’s plans during her accelerated doctorate program.

“As part of the scholarship, I’m committed to complete it in three years,” she said. “There are a lot of things I’d like to look at after completion. I want to continue research, remain engaged with the community, teaching and work in advocacy.”

She got an introduction of what’s expected from her during a boot camp before classes started in August.

“I was a bit nervous to go to the boot camp. I’m the first person in my family to pursue this level of education and I knew the people in this cohort are very accomplished, have been published and have done a lot of research,” Stuefen said. “While I went in feeling anxious about how it was going to go, it reinforced that this is the right thing I’m doing and there’s a reason I’m doing it. I think it helped reinforce my dedication to the process.”

Matt Schmidt
Nation’s best

Nenaber named top CNS

While eating lunch with a co-worker during a break at the University of Colorado Hospital, Amanda Nenaber ’06 was alerted she received an email.

She opened the email, which was from The National Association of Clinical Nurse Specialists. The email notified Nenaber that she won the National Clinical Nurse Specialist of the Year Award and would be presented with it in March in Atlanta at the national conference.

“I reread the email like six times,” she recalled, laughing at the memory. “I was totally taken aback and could not believe that I was the recipient. I felt super excited and anxious at the same time. I thought to myself, ‘wow, this is a huge honor to represent all Clinical Nurse Specialists (CNS) across the country, I better step up my game.’”

The National CNS of the Year Award recognizes a NACNS member for outstanding professional achievement in all aspects of CNS practice. It is presented each year to a nurse who demonstrates CNS competencies and exemplary practice in patient care, nursing and health-care delivery systems.

Work cited

The NACNS cited Nenaber’s work addressing prescription compliance and adherence. In 2016, Nenaber was the heart failure program manager at the University of Colorado Hospital and was responsible for maintaining the disease-specific advanced heart failure certification by The Joint Commission. She expanded a regulatory requirement for the heart failure population and identified that all patients would benefit from providing indications for medications.

Using expert change management skills and partnering with a transitions of care pharmacist, the ‘no-cost’ practice change has resulted in over 500,000 patients receiving more than 1 million prescriptions and information on why their provider prescribed that particular medication.

This initiative led to the University of Colorado Hospital being the first organization to include an indication of use at the time of prescribing within a specific electronic health record. The University of Colorado Hospital has expanded the requirement across the entire UC Health system.

“It is so powerful to be able to drive change, and change at this magnitude across a large health system, through a strong collaborative partnership. The success of this particular project was really due to the partnership that was created between myself and Kate Perica, a transitions of care pharmacist,” Nenaber said. “Collaboratively through this initiative, we were able to message the importance for patient safety, pay careful attention to the usability for the clinicians, and develop a deliberate strategy to create a consensus—based on data and pilot work—for a change, which is having a profound impact across our system.

The power of a team is undeniable and the ability of a CNS to establish and guide results-driven teams is one of my favorite contributions as a CNS.

“It’s hard for me to even find words to express what an honor it is to be named the national CNS of the year. It is a privilege to be able to represent the CNS community,” she continued. “I am most proud because the work that I have done in my CNS career is just another example of the amazing work that CNSs contribute day-in and day-out. I will forever work hard to continue to advocate for the CNS role and be a role model to others on the undeniable contributions of a CNS. I have so many amazing memories in my career so far as a CNS, and this award gives me even more motivation to get out there and continue to make a difference.”

Roots in 4-H

The University of Colorado Hospital Medical Group has recognized Nenaber, who is now the director of care transitions, as a content expert in transitional care redesign and population health. She’s also been selected by its executive leadership team to serve as the co-chair for the Transitional Care and Readmissions Steering Committee.

“I have always been a person with high aspirations. I really credit this early on in my life through 4-H,” said Nenaber, who attended Huron High School. “Being involved in 4-H taught me about values, the power of working with a team through whatever community you are part of, and to live a life that is healthy and happy. These experiences growing up played a significant role in not only my desire to pursue a career where I can take care of others, but my motivation to continue to make a difference in whatever role I serve.

“My education and clinical experiences prepared me to understand how my role as an advanced practice nurse would best allow me to impact care delivery. In addition to my own personal drive, the encouragement and support I received from the SDSU College of Nursing early on in my nursing career has also played a significant role in my achievements,” she continued. “Throughout my coursework at SDSU, I was constantly motivated to continue to do more and I knew I would continue to advance my career. Pursuing a Doctorate of Nursing Practice (DNP) degree was one of my ultimate career aspirations because I knew that as a CNS-DNP I would be able to continue to impact and advocate for my patients and their families, my health-care colleagues and the entire nursing profession.”

Nenaber, who earned her DNP in 2014, was chosen one of Colorado’s best nurses that year and was one of six recipients of the Nightingale Award. She also was named one of University of Colorado Hospital’s Magnet Nurses of the Year.

Matt Schmidt
Four scholarships made their debut at the 2017 Nursing Scholarship Banquet. They are: Theresa Garren-Grubbs Scholarship in Nursing (at right); Bowman Nursing Scholarship (middle row, left); Raymond C. and Rose T. Peterson Scholarship (middle row, right) and the Avera Excellence Scholarship in Nursing (bottom).
What a difference you can make

Our College of Nursing students are introduced to the best practices in patient safety and quality of care and can critically think, solve problems, and care for diverse clients in a safe, nonthreatening environment without risk to patients.

To ensure that continues, the college is creating the On Campus Clinical Learning Environment, which will transform the student experience. Two Wagner Hall classrooms and an outdated skills laboratory will become an active-learning classroom and an innovative learning environment.

The expanded hands-on training will help students save lives and safeguard their patients’ health. They will learn challenging fundamental skills and develop and practice decision-making skills with exemplary instruction from nursing faculty. A combination of lectures and hands-on demonstrations will teach students assessment skills and nursing procedures as they progress toward clinical competency and excellence.

Today’s students enter our hospitals, clinics and health-care settings filled with the latest technology. Nursing skills education should be conducted in a similar environment using the same technology. The skills laboratory and classrooms in Wagner were last remodeled in 1996.

Future generations of nursing students (and those receiving health care delivered by our graduates) should expect educational instruction using state-of-the-art equipment in a space that enhances and elevates the student experience.

The total cost of the project is $1.5 million with $300,000 already raised and the remaining $1.2 million to be secured with private funding. Working together, our more than 8,000 alumni and friends can secure the necessary resources. We are grateful for your generosity because you know what a successful SDSU needs to have for a transformational education.

Thank you for your support, generosity and belief in our development of the nursing leaders of tomorrow and generations to come.
Graduate Center grand opening

The College of Nursing’s West River Department held a ribbon-cutting ceremony as part of its open house celebration in March. Nearly 100 people were in attendance, including South Dakota Board of Regents Executive Director Mike Rush.