

ANNIE TAYLOR DEE

— SCHOOL OF —

NURSING



DOCTOR OF NURSING PRACTICE

Graduate Projects



WEBER STATE UNIVERSITY
Dumke College of Health Professions

Message from the Dean

In response to the intensified healthcare needs that surround us, the Annie Taylor Dee School of Nursing housed in the Dumke College of Health Professions at Weber State University (WSU), is still finding and seizing opportunities during these challenges. And you, graduate, are our success through the opposition.

As a graduate of the Doctor of Nursing Practice (DNP) program, we are proud to see you empowered by the very first doctorate degree offered by WSU. You will now move forward with the critical knowledge to provide leadership to the complex field of nursing. You will have the ability to develop innovative competencies needed for patient outcomes and healthcare deliveries. You will be able to educate at a higher level and offer advance practice approaches, and you will continue to be the essential and the contributing member of the healthcare teams you serve. We look forward to you standing as leading role models in the field of nursing and to the students that follow your footsteps.



We congratulate you on reaching this milestone and achieving your goals. You have worked hard, sacrificed some and experienced much to reach this point in your lives. We hope that you will stay in touch with us and let us know of your success.

Heartfelt congratulations to you and all the best.

Yasmen Simonian

PhD, MLS (ASCP)CM, FASAHP

Dean/Presidential Distinguished Professor
Dumke College of Health Professions

Message from the Chair



Congratulations, Graduates! You deserve to be celebrated! It is a pleasure for all of us here at the Annie Taylor Dee School of Nursing to recognize you for your hard work and perseverance. It is no small feat to graduate with a doctorate, and we could not be more proud. You are a part of history as you graduate with your Doctor of Nursing Practice (DNP) degree from the first doctoral program at Weber State University. We are confident that despite achieving a terminal degree in your field, you will continue to support and advance the nursing profession.

We also recognize that it takes a village, and we are grateful to your support system, who saw you through this monumental work. Your personal sacrifices and those of your loved ones enabled you to be where you are today.

The faculty and staff of the Annie Taylor Dee School of Nursing share your sense of accomplishment and pride with you. We are excited to see your impact on patients, families, and communities. Regardless of where you are in your nursing journey, we are confident that the knowledge and skills you have gained will benefit us all. Please know our sincere gratitude for allowing us to share this journey with you. We wish you all the best as you continue to pursue your dreams!

Rieneke Holman

PhD, RN

Chair & Professor

Annie Taylor Dee School of Nursing

Dumke College of Health Professions

Program Director Remarks

Congratulations, graduates of the Doctor of Nursing Practice Program! We extend our heartfelt accolades on your graduation from the Annie Taylor Dee School of Nursing, where you have successfully completed the Doctor of Nursing Practice program within the Dumke College of Health Professions at Weber State University. This significant achievement marks a momentous milestone in both your personal and professional journey.



As you step into this new chapter of your life, we want to acknowledge the numerous individuals who join us in celebrating your remarkable accomplishments. It has been a privilege to be a part of your educational journey, and we have witnessed your tremendous growth as advanced nurse clinicians, educators, and leaders. You are now equipped with the knowledge and skills necessary to translate evidence into practice, ultimately enhancing healthcare outcomes and advancing nursing practice across diverse healthcare settings.

With great anticipation, I look forward to seeing you carry forward our legacy of nursing excellence as you embark on your future endeavors. This is just the beginning of the remarkable impact you will make in the field of nursing.

Carrie Jeffrey

PhD, RN

DNP Program Director & Assistant Professor
Annie Taylor Dee School of Nursing
Dumke College of Health Professions

Faculty Remarks

I am incredibly impressed with the hard work and dedication I have witnessed throughout your projects at Weber State University. I love seeing your changes and impact on nursing as you improve environments, enhance patient care, and inspire those around you! In a field often portrayed as grueling and focused on burnout, it is refreshing to see you empowered to make changes and instill beauty and hope into healthcare. This is the true art of nursing. I am so grateful to have been a part of your journey as you advance your career! Congratulations on your graduation; you are all inspiring!

Amber Fowler

DNP, RN

Instructor

Annie Taylor Dee School of Nursing

Dumke College of Health Professions

I am so overwhelmed by the impact of your DNP projects and I am honored that I was able to be a part of your doctoral journey. You have had a profound effect on your communities, and you should be so proud of your accomplishments. Remember to continue serving others as you embark on your new careers. You have been absolutely fantastic students and a joy to work with. I am so proud of all of you and I can't wait to see where your journey takes you next. Congratulations!!!

Tiffany Hood

PhD, RN, CNE, CNOR

Assistant Professor

Annie Taylor Dee School of Nursing

Dumke College of Health Professions

Faculty Remarks

Congratulations on your persistence and grit in implementing and evaluating your DNP quality improvement initiatives! You have made significant and sustainable contributions to the communities you served.

Angela Page

DNP, APRN, PPCNP-BC

Assistant Professor

Annie Taylor Dee School of Nursing

Dumke College of Health Professions

Working with DNP-FNP graduates on their projects has been my honor and privilege. Their commitment to excellence has translated acquired knowledge into practice. These students have demonstrated critical thinking skills and an ability to translate research into practice through problem identification, proposal development, implementation, evaluation, and dissemination of knowledge. I am inspired by their exceptional motivation, resilience, and professionalism. Their meaningful projects improved nursing practice and elevated patient outcomes in their organizations and communities. I am grateful for the opportunity to be part of their journey and wish the graduates success in their future as healthcare leaders. You are an AMAZING group of nurses! Congratulations on your outstanding accomplishment!

Kelley Trump

DNP, MSN/ED, RN, CNE, COI

Assistant Professor

Annie Taylor Dee School of Nursing

Dumke College of Health Professions

Doctor of Nursing Practice Faculty and Staff

Suzanne Ballingham-Tebbs

MSN, APRN, FNP-BC
Instructor

Lynda Blanch

DNP Administrative
Assistant

Cathy Harmston

DNP, APRN, FNP-BC
Associate Professor

Kristy Baron

PhD, RN
Professor

Kathleen Cadman

PhD, RN, CNE, CPH
Associate Professor

Suzy Heugly

DNP, APRN, FNP-BC
Assistant Professor

Tamara Berghout

EdD, RN
Assistant Professor

Darcy Carter

DHSc, MHA, RHIA
Associate Professor

Rieneke Holman

PhD, RN
Professor

Cynthia Beynon

PhD, RN, CNE
Associate Professor

Amber Fowler

DNP, RN
Instructor

Tiffany Hood

PhD, RN, CNE, CNOR
Assistant Professor

Elizabeth Bizzell

MHA
Graduate Program Clinical/
Marketing Coordinator

Valerie Gooder

PhD, RN, NHDP-BC
Professor

Jon Kelly

MNA, MAP, RN
Associate Professor

Doctor of Nursing Practice Faculty and Staff

Anne Kendrick

DNP, RN, CNE
Assistant Professor

Autumn Rafford

MSN, FNP-C
Instructor

Kelley Trump

DNP, MSN/ED, RN, CNE, COI
Assistant Professor

Diane Leggett-Fife

PhD, RN
Associate Professor

Mary Anne Reynolds

PhD, RN, ACNS-BC
Professor

Catie Weimer

Graduate Programs Clinical
and Marketing Coordinator

Melissa NeVille-Norton

DNP, APRN, CPNP-PC, CNE
Professor

Ann Rocha

PhD, APRN, FNP-BC
Associate Professor

Stephanie Wheatley

MSN, APRN, FNP-C
Instructor

Marvin Orrock

RPh, PharmD
Assistant Professor

Apolonia Silva

DNP, APRN, FNP-BC
Adjunct Instructor

Kris Williams

DNP, APRN, FNP-C
Professor

Angela Page

DNP, APRN, PPCNP-BC
Assistant Professor

Community Partners

We want to send a generous thank you to our community partners for their time, dedication and commitment to our program and students. Without their participation, guidance and assistance we would not have been able to strive in our commitment to our students for a high quality and impactful educational experiences.

Weber State University aims for a dual mission approach in education by creating community-based learning and public service opportunities, we thank the following organizations for helping us achieve our goal!

**CommonSpirit Holy Cross
Hospital - Davis**
**Davis School District - Sand Springs
Elementary School**

**DaVita Kidney Care at the
University of Utah Hospital**

**George E. Wahlen Department of
Veteran Affairs (VA) Medical Center -
Blue Clinic**

Horizon Home Health and Hospice

**Intermountain Health - American
Fork Hospital**

**Intermountain Health - Primary
Children's Hospital Emergency
Department**

**Intermountain Health - Primary
Children's Hospital Feeding and
Swallowing Center**

**Intermountain Health - Riverton
Hospital**

Lifespring Pain Management Center

Meadow Brook Rehab and Nursing

**MountainStar Health - Cache
Valley Hospital**

National Blood Clot Alliance

**Salt Lake City School District - Salt
Lake Center for Science Education -
Bryant Middle School**

**Salt Lake City School District - Salt
Lake City School Nurses**

**UnitedWay of Utah County - Volunteer
Care Clinic**

**University of Utah Health - Huntsman
Cancer Hospital**

**University of Utah Health - Redwood
Health Center**

Wasatch County Health Department



2023

DOCTOR OF NURSING PRACTICE

Graduate Projects



Hypo/Hyperglycemic Protocol Implementation in a Skilled Nursing Facility (SNF)



**ROBERT
BAIRD**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

This quality improvement project focuses on training skilled nursing facility staff to recognize signs and symptoms and act quickly and intentionally during a patient's glycemic crisis. Once completed, an evaluation of protocol knowledge and participants' confidence in their abilities to perform in a crisis was collected to determine training effectiveness.

METHODOLOGY

A literature review explored the factors contributing to the presentation/treatment needs of the diabetic population in an SNF during a glycemic crisis. The evidence-based findings were used to develop a training program. A pre-test was administered, training sessions were held, and a post-test was conducted. Finally, staff were asked to complete a brief qualitative survey to reflect on their perceived confidence and learning based on the education provided.

RESULTS

Pre- and post-test questions assessed knowledge of symptoms and protocols during a glycemic crisis. Results showed significant improvement in staff knowledge. Qualitative survey results showed that most staff felt more knowledgeable and confident in their ability to recognize and react to a patient's glycemic crisis.

IMPLICATIONS FOR PRACTICE

Focused training in glycemic crisis protocols increases staff knowledge and confidence in treating patients in such crises.

PROJECT CONSULTANT

Greg Baird MD

FACULTY LEADS

Cynthia Beynon PhD, RN, CNE

Amber Fowler DNP, RN

Supporting Enteral Nutrition Management in the Pediatric Home Setting



**HEIDI K
BECKMAN**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

This quality improvement project aimed to improve home health pediatric nurses' training and access to resources for pediatric home enteral nutrition (HEN) management. The project involved implementing an evidence-based learning platform on Horizon Home Health's employee website to enhance skill preparation, learning, and resource accessibility.

METHODOLOGY

The training was presented at a monthly staff meeting. The pediatric nurses were invited to complete a pre-survey on their knowledge of the HEN resources on the company website. After a PowerPoint presentation on the need and value of evidence-based resources, the pediatric nurses were invited to participate in a post-survey to evaluate the learning and implementation of the resources. Early planning for the website knowledge center involved collaborating with the American Society for Parenteral and Enteral Nutrition (ASPEN) and Primary Children's Hospital staff to ensure the implementation of gold-standard resources and up-to-date learning.

RESULTS

The company website was updated with evidence-based resource links. Pre-survey results of nurses (N = 21) indicated an educational gap in the awareness and use of evidence-based learning and teaching resources for pediatric HEN. The post-survey showed an enhanced understanding of access to educational resources.

IMPLICATIONS FOR PRACTICE

Standardizing access to evidence-based HEN resources improves nurses' confidence in providing care and education for pediatric patients.

PROJECT CONSULTANTS

Angie Thompson RN
Hillary Torres MSN, RN

FACULTY LEADS

Kristy Baron PhD, RN
Anne Kendrick DNP, RN, CNE

Educating School Nurses About Interdisciplinary Student Well-Being Teams



**ELIZA
BREMER**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

This project's primary purpose was to increase school nurse understanding of and appropriate recognition and referral of students with mental health concerns to school interdisciplinary well-being mental health teams.

METHODOLOGY

An educational presentation was created and offered for the Salt Lake City School District nurses regarding their role in student mental health and knowledge of student interdisciplinary well-being teams. Pre- and post-surveys were distributed to the school nurses through a QR code to measure nurses' attitudes and knowledge in identifying and referring students with mental health concerns to well-being teams.

RESULTS

Analysis of the knowledge and attitude of school nurses revealed gaps in knowledge concerning their role in student mental health and well-being teams. Data suggested the educational presentation increased awareness of well-being team function and school nurse role in the mental health realm on a school-wide and individual student level.

IMPLICATIONS FOR PRACTICE

School nurses often encounter students with mental health challenges. Education regarding student mental health and well-being teams will improve school nurse's understanding of their role in student mental health, aiming for improved student mental health and academic outcomes.

PROJECT CONSULTANT

Chathuri (Chat) Illapperuma-Wood PhD, NCSP, BCBA, LBA

FACULTY LEAD

Angela Page DNP, APRN, PPCNP-BC

Implementing Home Blood Pressure Monitoring for Postpartum Patients with Hypertensive Disorders of Pregnancy

PURPOSE

This project's focus was to implement home blood pressure monitoring (HBPM) for postpartum patients with hypertensive disorders of pregnancy (HDP) to improve maternal morbidity and postpartum readmission rates at Riverton Hospital.

METHODOLOGY

Postpartum nurses were given a pre-education survey and were educated on HDP and HBPM implementation for postpartum patients. Next, postpartum nurses were given a post-education survey to assess their confidence in educating patients regarding HBPM and HDP risks and complications. For the next three months, HBPM was implemented with postpartum HDP patients. After three months of HBPM implementation, Riverton Hospital's postpartum readmission rates were evaluated and compared to pre-HBPM initiation readmission rates. Data were analyzed through the Qualtrics surveying program.

RESULTS

Eight nurses participated in this study, with eight completing the post-survey. Data analysis revealed increased nurse knowledge and confidence in HBPM initiation and HDP complications. Nurse responses showed a general belief that HBPM would improve postpartum maternal outcomes related to hypertension. Aggregate data showed a 72% improvement rate in postpartum readmission with HBPM implementation.

IMPLICATIONS FOR PRACTICE

Results from this quality improvement project show that HBPM enhances outpatient blood pressure monitoring. This additional monitoring may lead to early intervention, thereby decreasing postpartum readmission rates and improving patient outcomes.

PROJECT CONSULTANT

Amber Nielson MSN, RN

FACULTY LEAD

Kelley Trump DNP, MSN/ED, RN, CNE, COI



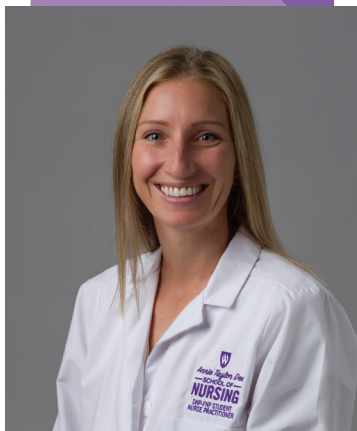
**KATHERINE
BRUNNER**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

Improving Health Literacy Among Somalian Refugees



**SHELLEY
CHEEVER**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

Refugees in the United States of America face higher than average rates of disease, death, stress from past trauma, and poor access to basic health care. One fundamental element of improving health and overall well-being is raising the level of health literacy. Identifying barriers refugees face when seeking medical care is essential to increasing health literacy. The aim of this project is to assess barriers faced by Somali refugees when seeking medical care, provide targeted education to address barriers, and ultimately increase health literacy among Somali refugees living in the greater Salt Lake City area.

METHODOLOGY

A needs assessment was crafted to find specific barriers members of the Somali population face when seeking medical care. Next, three videos addressing the barriers were created. Videos were disseminated through the Somali Community Self-Management Agency and the University of Utah Redwood Clinic. Lastly, a post-education survey was utilized to evaluate the effect of educational videos in addressing identified barriers.

RESULTS

After viewing the educational videos, Somali community members reported an increased confidence in asking questions during a medical interaction, an increase in requesting language services, and an increase in discussing cultural preferences with their medical team.

IMPLICATIONS FOR PRACTICE

This DNP project increased Somali confidence when seeking medical care and during healthcare encounters. The success of the educational videos indicates that this teaching modality is effective and that efforts to increase health literacy in the refugee population should be continued. Furthermore, these videos can be translated into other languages as needed.

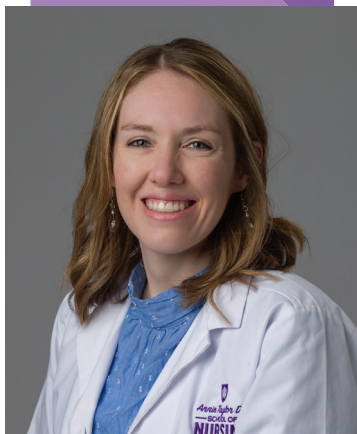
PROJECT CONSULTANT

Crystal M. Armstrong MD

FACULTY LEAD

Tiffany Hood PhD, RN, CNE, CNOR

Non-Pharmacological Pain Management in the Emergency Department



**RACHEL
HOGAN**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

The aims of this quality improvement project were to increase emergency department (ED) nurses' knowledge of and confidence in using non-pharmacological methods of pain management to treat acute pain.

METHODOLOGY

ED nurse knowledge of and likelihood of using non-pharmacological pain management was assessed using a presurvey. Gaps in knowledge were identified and nurses were given education on methods of non-pharmacological pain management. ED nurses were then reassessed using a postsurvey to compare knowledge and confidence in utilizing these methods.

RESULTS

Post implementation survey results identified minimal change in ED nurses' knowledge of and confidence in utilizing non-pharmacological methods of pain management. ED nurses gained confidence in utilizing non-pharmacological methods of pain management without an order from a provider.

IMPLICATIONS FOR PRACTICE

ED nurses' knowledge of non-pharmacological methods of pain management can be increased by providing education and training on using these methods. Making non-pharmacological resources available in the ED did not increase the ED nurses' likelihood of implementing these methods or their confidence in using them. However, they have increased access to materials needed than they did before, as well as increased support from the ED in utilizing them.

PROJECT CONSULTANT

Jon Darin Willardson MD

FACULTY LEADS

Cynthia Beynon PhD, RN, CNE

Amber Fowler DNP, RN

Implementing an Adverse Childhood Experiences (ACEs) Screening Tool in a County Health Department in Utah



**JESSICA JEAN
JUDD**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

This quality improvement project aimed to implement an Adverse Childhood Experiences (ACEs) screening program in a county health department in Utah, thereby increasing staff ACEs knowledge and increase the number of ACEs screenings administered.

METHODOLOGY

The Safe Environment for Every Kid (SEEK) program was identified as an effective ACEs screening tool. Licensure for use was obtained. Education was presented to Wasatch County Health Department (WCHD) staff regarding ACEs, harms of toxic stress, and the SEEK program. SEEK training modules were provided. Screening was then implemented targeting caregivers of children aged 0-5 years of age that utilize WCHD programs. Staff were surveyed pre and post education and the screening period to determine if ACEs knowledge had improved and the number of screenings had increased.

RESULTS

Staff experienced an increase in their ACEs knowledge and the harms of toxic stress. The number of ACEs screenings and referrals for positive screens at the WCHD increased.

IMPLICATIONS FOR PRACTICE

A gap in healthcare exists in understanding, identifying, and treating toxic stress burdens from ACEs. Current evidence demonstrates the need for increased awareness, screening, and application of evidence-based treatments to improve individual and societal health outcomes.

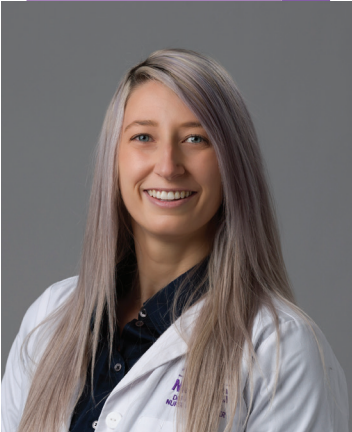
PROJECT CONSULTANT

Jonelle Fitzgerald MPH

FACULTY LEAD

Angela Page DNP, APRN, PPCNP-BC

The Student Distress Guide for Faculty



**LIZ
KELLY**

DNP, RN, CCRN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

This project aims to integrate a standardized education and referral protocol for school faculty regarding physical and mental student wellbeing.

METHODOLOGY

A Student Distress Guide was developed to address faculty confidence in identifying and responding to student well-being concerns. Faculty education about the Guide was presented in person three times and distributed via paper copies, email, and QR codes. During a three-month period, faculty then had the opportunity to use the education to guide their evaluation of distressed students and appropriate referral protocol. Surveys evaluated the faculty's confidence levels pre and post-education.

RESULTS

Nineteen pre-surveys and post-surveys were evaluated. Post-intervention, faculty reported an increased understanding of the school's social-emotional learning resources and increased use of the referral system. Faculty did not report a significant change in navigating student behavior, but a majority (84%) reported that the intervention was helpful. Qualitative answers further described process concerns and feedback on the current system.

IMPLICATIONS FOR PRACTICE

This project demonstrates how to bring evidence-based practice to a community setting to educate a population on a health issue. This intervention approach could be executed similarly with other populations and settings.

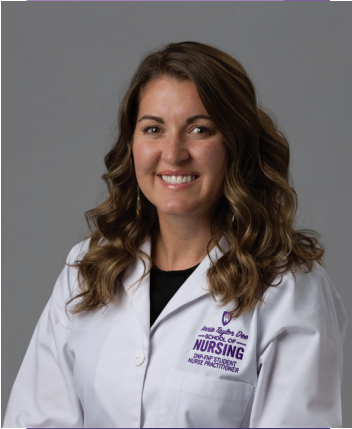
PROJECT CONSULTANT

Chathuri (Chat) Illapperuma-Wood PhD, NCSP, BCBA, LBA

FACULTY LEAD

Angela Page DNP, APRN, PPCNP-BC

Improving Postpartum Follow-up After Discharge



**JULIANNE
LANDON**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

This quality improvement project aimed to standardize postpartum teaching and provide resources for nurses. Standardization of education allowed nurses to gain confidence in implementing a nurse-driven postpartum follow-up phone call system for all discharged postpartum mothers. Lack of standardization for postpartum follow-up leaves discharged mothers at a higher risk for undiagnosed pregnancy complications and unaddressed infant-care problems. Early postpartum intervention can improve the quality of life for the mother and newborn by identifying risk factors. In addition, improved education and resources can aid nurses in providing improved follow-up care for postpartum mothers after discharge.

METHODOLOGY

A cross-sectional exploratory study was used to analyze the effectiveness of a postpartum education program in a small hospital in the western United States. Pre- and post-surveys were used to assess the efficacy of standardized postpartum teaching.

RESULTS

A cross-sectional exploratory study was used to analyze the effectiveness of a postpartum education program in a small hospital in the western United States. Pre- and post-surveys were used to assess the efficacy of standardized postpartum teaching.

IMPLICATIONS FOR PRACTICE

Project findings promote the standardization of a postpartum training program, which may improve postpartum outcomes, newborn complications, and nurses' confidence in completing postpartum follow-up phone calls.

PROJECT CONSULTANT

Deena Balls MSN, RN

FACULTY LEAD

Kelley Trump DNP, MSN/ED, RN, CNE, COI

Standardized Screening Protocol for Patients with Treatment-Resistant Depression Receiving Ketamine Infusion Therapy



**STACY
LESUEUR**

**DNP, MSNA,
CRNA**

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

This quality improvement project aimed to standardize the screening process of treatment resistant depression (TRD) patients inquiring about ketamine infusion therapy. The lack of a standardized protocol in ketamine infusion therapy for TRD can adversely affect treatment safety and patient satisfaction, compromising overall treatment outcomes. While ketamine has an excellent safety profile and is usually well tolerated, it is crucial to consider contraindications and carefully screen patients before treatment.

METHODOLOGY

The lack of a standard screening process at ketamine clinics was evaluated, and two screening tools were developed to assist in the initial patient encounter and at the formal consultation before treatment. The protocol was created using the AGREE II instrument and then was appraised by two experts using the AGREE II instrument, which utilized a Likert scale to collect quantitative data.

RESULTS

The two appraisals of the screening tools were combined, and three of the five domains rated >70% score. Those included Domain 1 (Scope and Purpose), Domain 2 (Stakeholder Involvement), and Domain 4 (Clarity of Presentation), with scores of >89%, >72%, and >86%, respectively. The Overall Guideline Assessment recommendation for usage was “Yes, with modifications.”

IMPLICATIONS FOR PRACTICE

Using standardized screening protocols for patient selection in ketamine therapy for TRD can improve patient safety and satisfaction. Using the screening tool when initially evaluating the patient will increase the clinic's efficiency by identifying individuals who may not be candidates for infusions.

PROJECT CONSULTANT

Jeff Gainok DNP, CRNA

FACULTY LEADS

Kristy Baron PhD, RN

Anne Kendrick DNP, RN, CNE

Increasing Earlier Palliative Care Referrals for Veterans



**AILIEN
LUU**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

Lack of continuing education about palliative care can lead to a lack of knowledge about palliative care, decreased confidence in having advance care planning discussions, and making later referrals to palliative care for veterans. This quality improvement project aimed to increase earlier palliative care referrals for veterans by implementing an educational intervention targeting healthcare professionals in the primary care setting.

METHODOLOGY

This project involved the development of a palliative care educational presentation, implementing a required educational competency for nurses, and creating a trifold palliative care pamphlet for veterans. Participants completed pre- and post-surveys designed to evaluate their knowledge and attitudes about palliative care.

RESULTS

After the education was presented, surveys demonstrated that participants had increased knowledge of palliative care and confidence in initiating conversations about palliative care and advance care planning. Moreover, participants reported increased confidence in discussing palliative care options and improved knowledge of available resources for veterans needing such services.

IMPLICATIONS FOR PRACTICE

Providers in the primary care setting should have the knowledge and communication skills regarding advance care planning to make appropriate, timely referrals to palliative care. Patients followed by palliative care have increased quality of life, more support, and lower costs near the end of life. Continuing education for all staff will increase the likelihood that advance care planning discussions will occur and earlier palliative care referrals can be made.

PROJECT CONSULTANT

Devan Millard MD

FACULTY LEAD

Tiffany Hood PhD, RN, CNE, CNOR

Implementing an Emotional Debriefing Protocol in a Pediatric Hospital Emergency Department



**RACHEL
MARGESON**

DNP, RN, CPEN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

To develop a debriefing that facilitates immediate intervention and discussion for staff members directly involved in the care of patients requiring complex resuscitation, trauma activations, patient deaths, as well as any case that is traumatic for staff.

METHODOLOGY

Critical Incidence Stress Management (CISM) debriefing was identified as an intervention for staff following traumatic events. Prior to any implementation, staff were surveyed to gauge burnout, exposure and response to traumatic events, and their understanding of CISM debriefings. Staff were educated on the CISM debriefing style, and a CISM debriefing process was implemented, with a paging process to gather staff. Following implementation, staff were surveyed to assess knowledge, burnout, and emotional responses.

RESULTS

Staff members increased their knowledge of CISM debriefings and burnout syndrome. Results revealed increased staff use of healthy coping mechanisms. More than half of the respondents reported taking increased time to process work-related traumatic events.

IMPLICATIONS FOR PRACTICE

Implementing a debriefing protocol in a pediatric emergency department has the potential to decrease staff burnout and turnover, decrease patient safety events, and improve staff quality of life.

PROJECT CONSULTANT

Rhonda Carter MSN, RN, CPEN

FACULTY LEAD

Angela Page DNP, APRN, PPCNP-BC

Implementing a Cognitive Screening Tool for the Older Adult Surgical Patient in the Preoperative Outpatient Setting



**JOANNIE
MARTIN**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
SCHOOL OF
NURSING

PURPOSE

This quality improvement project aimed to improve the Huntsman Cancer Hospital's Genitourinary (GU) Surgical staff's knowledge about cognitive impairment and screening and to implement a pilot program to screen for preoperative cognitive impairment in radical cystectomy patients age 65 and older.

METHODOLOGY

A pre-intervention survey was used to evaluate the attitude of the Huntsman Cancer Hospital's GU Surgical team toward preoperative cognitive screening. Team members were then provided education and training on cognitive impairment and the Mini-Cog screening tool. Staff members provided feedback on the education they received. Four months after the educational intervention, a final post-intervention survey was distributed to evaluate the staff's attitude toward preoperative cognitive screening. In addition, a University of Utah data analyst ran a query against flowsheet data to identify patient encounters where Mini-Cog® scores were documented four months after the educational intervention.

RESULTS

The educational intervention on cognitive impairment and the Mini-Cog® demonstrated improvement in a) staff knowledge regarding cognitive impairment and the Mini-Cog®, b) staff members' comfort level at screening patients for cognitive impairment, and c) use of the Mini-Cog® in the preoperative outpatient setting.

IMPLICATIONS FOR PRACTICE

Preoperative cognitive screening is feasible and beneficial and can improve the quality of preoperative patient care by identifying a significant risk factor for adverse postoperative outcomes. Educating and training clinical staff about using a cognitive screening tool helps address cognitive impairment in the preoperative setting.

PROJECT CONSULTANT

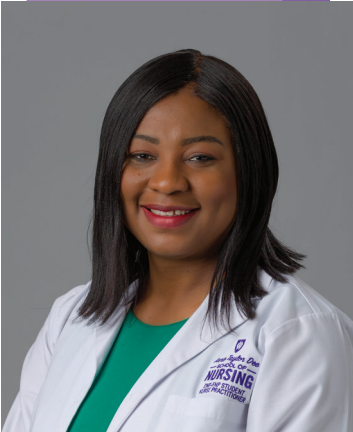
Christopher Dechet MD, FACS

FACULTY LEADS

Cynthia Beynon PhD, RN, CNE

Amber Fowler DNP, RN

Implementing Staff Education and Standardization Protocol to Improve Safe Disposal of Controlled Substance Practices in a Pain Management Clinic



**PHILOMINA
OBAH**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNE TAYLOR DEE
SCHOOL OF
NURSING

PURPOSE

This quality improvement project aimed to improve the staff's knowledge of controlled substance disposal guidelines at a pain management clinic. Unsafe disposal of prescription-controlled substances increases the ease of illegal access to these medications, leading to diversion, accidental poisoning, and nonmedical use. A lack of patient education and standardized safe disposal guidelines was identified as a significant contributing factor to the unsafe disposal of these medications.

METHODOLOGY

Standardized disposal guidelines were developed using the Food and Drug Administration, Drug Enforcement Administration, and Environmental Protection Agency guidelines. A patient-focused medication disposal education flier was created in English and Spanish. Participants received onsite training on the guidelines and patient education. Pre- and post-education surveys were administered to assess the participants' pre- and post-education knowledge. The post-survey also measured intervention benefits to participants.

RESULTS

The pre-survey results of healthcare providers (N=17) at a pain management clinic identified a lack of staff education and standardized disposal guidelines as a barrier to the safe disposal of unused prescription-controlled substances. The post-intervention survey (N=13) indicated increased participants' knowledge of guidelines and the need for patient education.

IMPLICATIONS FOR PRACTICE

Standardized disposal guidelines promotes safe practices that decrease safety risks associated with improperly disposing of controlled medications.

PROJECT CONSULTANT

Kelley Weeks MHA

FACULTY LEADS

Kristy Baron PhD, RN

Anne Kendrick DNP, RN, CNE

Venous Thromboembolism: Evaluating Patient Advocacy Needs for The National Blood Clot Alliance (NBCA)



**STELLA
OBAH**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

This intervention is aimed at understanding the workflow process for The National Blood Clot Alliance (NBCA) staff, assessing NBCA staff's confidence in meeting the needs of the VTE population, and addressing concerns that may hinder them from achieving their goal of patient advocacy for the VTE population. Enhancing staff competence and understanding their workflow process may help improve the NBCA's inquiry process.

METHODOLOGY

A pre-survey and post-survey utilizing Likert scales and educational materials in the form of PowerPoint, Strategic Plan handout, and sorted data (Pivot table and charts) was used. A recorded video Presentation, and strategic plan were provided to the NBCA staff via email.

RESULTS

Post-survey results from participants N=5 review of the strategic plan showed higher confidence, 60% in understanding and meeting the needs of the VTE population and 80% in redirecting inquiries to the needed resources than they reported in the pre-survey, 60% of participants somewhat agreed that the NBCA website was up to date with all major concerns of the VTE population, and 60% felt that the workflow process for incoming inquiries was somewhat adequate. Additionally, five health topics were consistent throughout both surveys.

IMPLICATIONS FOR PRACTICE

Although staff confidence was significantly improved, staff still requested more information on technology that could be used to improve the inquiry process on their website. The next phase will be to develop algorithms to triage incoming questions, develop a referral process, and track referrals and outcomes.

PROJECT CONSULTANT

William Robertson DHSc, NRP

FACULTY LEAD

Kelley Trump DNP, MSN/ED, RN, CNE, COI

Nurse-Led Hemodialysis Patient Education



**KRISTA
PERRY**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

This intervention aimed to address the competence and confidence of dialysis nurses' ability to educate patients. Dialysis patients have knowledge gaps in disease management, including treatment compliance, renal diet management, fluid restriction, and medication compliance. Improving nurses' confidence and competence enhances the quality of patient education and addresses the knowledge gap in hemodialysis (HD) patients with end-stage renal disease in the inpatient setting.

METHODOLOGY

A pre-survey and post-survey utilizing Likert scales and an educational PowerPoint training were administered to thirteen dialysis nurses at the University of Utah Hospital. A nurse-led education intervention was established to provide education to hemodialysis patients during their dialysis treatments. Education centered on medication compliance, fluid restriction, renal diet compliance, and hemodialysis treatment compliance.

RESULTS

The data was mixed with some pre-survey responses with higher confidence in patient education than in the post-survey. Some respondents did note that they felt the educational material was valuable. Both pre-and post-surveys revealed high levels of confidence in educating patients. One hundred percent of respondents indicated that 25-50% of the information presented was new.

IMPLICATIONS FOR PRACTICE

Although dialysis staff may be confident and competent in their knowledge of dialysis, patients often do not share this same understanding. More research should be done on the amount of education for dialysis patients in the inpatient and outpatient settings. In addition, more education is likely required for patients on different dialysis modalities and those for acute kidney injuries versus chronic kidney disease.

PROJECT CONSULTANT

Richard Jepson MSN, RN, MBA

FACULTY LEAD

Kelley Trump DNP, MSN/ED, RN, CNE, COI

Utah Valley Volunteer Care Clinic (VCC) Diabetes and Hypertension Screening Program



**JENNIFER
RIGBY**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
SCHOOL OF
NURSING

PURPOSE

Low-income uninsured residents in Utah County have limited access to screening and preventative care services for diabetes and hypertension. Access to screening programs and preventative care are necessary for the early identification and treatment of chronic conditions in this vulnerable population. This quality improvement project aimed to create a hypertension and diabetes screening program to serve low-income, uninsured Utah county residents.

METHODOLOGY

Screening events were implemented in the Provo Volunteer Care Clinic twice monthly from February to April 2023. Patients identified with elevated blood pressure and/or hemoglobin A1c levels were provided educational resources, seen by a medical provider, and referred to subsidized clinics for long-term management of their disease.

RESULTS

One hundred four patients participated in the screening events during the screening timeline. Forty-three participants were identified as having hypertension, diabetes, prediabetes, or a combination of hypertension and diabetes. Post-screening participation (n=11) was limited, but fifty-five percent of those who participated in post-screening evaluation were compliant with their prescribed plans of care. Twenty-seven percent of the post-screening participants scheduled an appointment for long-term management of their diagnosed condition after their screening.

IMPLICATIONS FOR PRACTICE

Screening events at the VCC were effective at identifying at-risk, low-income, uninsured residents for hypertension and diabetes. Increased post-screening data is needed to evaluate the effectiveness of educational resources regarding diabetes and hypertension. Also, compliance with follow-up screening and referral was limited. Additional resources could be invested in this program to improve strategies for follow-up and referral.

PROJECT CONSULTANT

Elizabeth Blackwell MD

FACULTY LEAD

Tiffany Hood PhD, RN, CNE, CNOR

A portrait of a young woman with long, wavy brown hair, smiling warmly. She is wearing a white lab coat over a black top. The lab coat has a name tag that reads "Alexa Taylor, DNP" and "NURSING" with "DNP AND EDUCATION NURSE PRACTITIONER" below it. The background is a solid dark grey.

**FAMILY NURSE
PRACTITIONER**

Training Nurses to Manage Care for Patients Receiving Ketamine Therapy for Pain and Treatment- Resistant Depression



**KENDRA
WILLIAMS**

**DNP, MSNA,
CRNA**

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
— SCHOOL OF —
NURSING

PURPOSE

This project aims to implement an educational training program to improve patient safety and outcomes by providing registered nurses (RNs) with the knowledge and skills necessary to administer ketamine infusions. Ketamine is an “off-label” and highly effective alternative for treatment-resistant depression and acute and chronic pain. Still, it can produce dose-dependent side effects that may result in adverse events if not recognized and mitigated promptly. Because ketamine is an old drug that has been repurposed, guidelines, training, and regulations are lacking.

METHODOLOGY

A pilot project was developed with an evidence-based educational tool. An email invitation was sent to RNs licensed in Utah to voluntarily participate in an anonymous knowledge check to assess baseline knowledge of ketamine. Then, they were provided with an educational module and asked to retake the knowledge check after viewing the education. The results were compared to assess the effectiveness of the educational tool.

RESULTS

The pre-educational knowledge check showed an educational gap in the basic knowledge necessary to provide safe and effective care for patients receiving ketamine therapy. After the educational intervention, the post-educational knowledge check scores increased.

IMPLICATIONS FOR PRACTICE

The RNs’ knowledge of ketamine improved after the educational module. The educational training program can improve patient safety and outcomes, reduce the risk of errors and adverse events, and enhance the overall quality of care.

PROJECT CONSULTANT

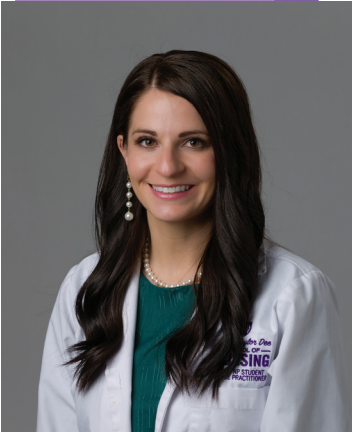
James Stimpson DNP, CRNA

FACULTY LEADS

Kristy Baron PhD, RN

Anne Kendrick DNP, RN, CNE

Healthy Behaviors for Elementary School-Aged Children



**MELANIE
YOUNG**

DNP, RN

**FAMILY NURSE
PRACTITIONER**

ANNIE TAYLOR DEE
SCHOOL OF
NURSING

PURPOSE

This quality improvement project aimed to provide resources and educate faculty and staff about children's healthy behaviors at a Utah public elementary school to increase their knowledge and confidence in teaching children about physical activity, nutrition, and hand hygiene.

METHODOLOGY

A needs assessment identified a gap in nutrition, physical activity, and hand hygiene education in kindergarten through sixth grade. The elementary school faculty and staff attended a thirty-minute education session covering the above three healthy behaviors related to children. Additionally, teachers were given evidence-based educational deliverables designed for their students about the three topics. Three surveys were used for data collection and analysis, including pre-pre-education, post-education, and year-end surveys. Finally, materials were disseminated to Health and Nursing Services at Davis School District.

RESULTS

Twenty-three faculty members participated in the pre-study, twenty completed the post-survey, and twelve completed the year-end survey. After implementation, elementary school faculty and staff strongly agreed that they possessed the knowledge to teach their students about nutrition (45%), physical activity (50%), and hand hygiene (80%). Additionally, the same population felt extremely confident in teaching their students about nutrition (30%), physical activity (25%), and hand hygiene (65%) with education and deliverables.

IMPLICATIONS FOR PRACTICE

Educating teachers and health and nursing services in Davis School District about nutrition, physical activity, and hand hygiene increases knowledge and confidence in teaching their students about healthy behaviors. Therefore, teaching healthy behaviors in elementary schools has the potential to promote lifelong healthy living.

PROJECT CONSULTANT

Kim Johnston MEd

FACULTY LEAD

Kelley Trump DNP, MSN/ED, RN, CNE, COI



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