# ANNIE TAYLOR DEE SCHOOL OF NURSING



## DOCTOR OF NURSING PRACTICE Graduate Projects



## 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

Dear Doctor of Nursing Practice Graduates,

Your graduation from the Annie Taylor Dee School of Nursing, Master of Science in Nursing, and Doctor of Nursing Practice Programs in the Dumke College of Health Professions is an essential personal and professional milestone and deserving of our sincerest congratulations.

Many individuals celebrate your accomplishments on this special day. It has been a pleasure to support your learning and professional growth as advanced nurse educators and leaders who are



prepared with the knowledge and skills to teach, translate evidence into practice to improve healthcare outcomes, and advance nursing practice in various healthcare settings. We look forward with great anticipation as you continue our legacy of nursing excellence in your future pursuits.

Congratulations!

## Melissa NeVille Norton

DNP, APRN, CPNP-PC, CNE

Graduate Programs Directors & Associate Professor Annie Taylor Dee School of Nursing Dumke College of Health Professions

## Faculty & Staff Remarks

I have enjoyed serving as one of the faculty overseeing the DNP projects and have witnessed remarkable achievements with successful project outcomes. Moreover, I have recognized the time and effort you have dedicated to promoting the success of your projects, and it has made a difference in people's lives. I am confident you are prepared to be collaborative leaders in education, health care, and the community. I appreciate the opportunity to experience this journey with you—DNP graduates. Congratulations to an outstanding group of nursing graduates!

## **Kristy Baron**

PhD, RN

Professor Annie Taylor Dee School of Nursing Dumke College of Health Professions

Working with DNP Executive Leadership 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. RN, CNE, COI

Assistant Professor Annie Taylor Dee School of Nursing Dumke College of Health Professions

## Doctor of Mursing Practice Faculty

## Suzanne Ballingham-Tebbs

MSN, APRN, FNP Instructor

## Kristy Baron

PhD, RN Professor

## **Tamara Bergout**

EdD, RN Assistant Professor

## Cynthia Beynon

PhD, RN, CNE Associate Professor

## Kathleen Cadman

PhD, RN, RAC-CT, CNE Associate Professor

## **Darcy Carter**

DHSc, MHA, RHIA Associate Professor

## Valerie Gooder

PhD, RN, NHDP-BC
Professor

## **Cathy Harmston**

DNP, APRN, FNP-BC Associate Professor

## Suzy Heugly

DNP, APRN, FNP-BC Assistant Professor

## Tiffany Hood

PhD, RN, CNE Assistant Professor

## Jon Kelly

MNA, MAP, RN Associate Professor

## Diane Leggett-Fife

PhD, RN Associate Professor

## Melissa NeVille-Norton

DNP, APRN, CPNP-PC, CNE Professor

## **Marvin Orrock**

RPh, PharmD Assistant Professor

## Angela Page

DNP, APRN, PNP-BC Assistant Professor

## Mary Anne Reynolds

PhD, RN, ACNS-BS Professor

## Ann Rocha

PhD, APRN, FNP-BC Associate Professor

## **Kelley Trump**

DNP, MSN, RN, CNE, COI Assistant Professor

## **Stephanie Wheatley**

MSN, APRN, FNP-C Instructor

## Kris Williams

DNP, APRN, FNP-C 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!

**Davis Hospital & Medical Center** 

Gastroenterology Associates, LLP

**Inspiration Home Health and Hospice** 

Intermountain Health, Bryner Pediatrics

Intermountain Health, Saint George Regional Hospital

**New Hope Crisis Center** 

Sigma Theta Tau International Honor Society of Nursing, Nu Nu Chapter

**Tooele County Emergency Management** 

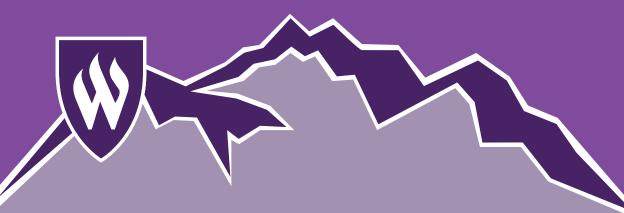
**Utah Mobile Physicians** 

Weber State University, Annie Taylor Dee School of Nursing





## DOCTOR OF NURSING PRACTICE Graduate Projects



## TRISH **GIBBS** DNP EXECUTIVE LEADERSHIP RN. CNE ANNIE TAYLOR DEE NURSING

## Implementation of a Trauma-Informed Yoga Program

## **PURPOSE**

Trauma is exposure to an event or experiences perceived as a significant safety threat. Current treatments have a high attrition rate, may not be suitable or effective for all survivors, are avoided by some survivors due to a requirement to disclose specifics related to their trauma or fail to address the mind-body relationship associated with trauma. This project explored the efficacy of Trauma-Informed Yoga (TIY) as an adjunctive or alternative treatment to traditional trauma interventions to increase interoceptive awareness, process somatic symptoms, reduce trauma symptomatology, and improve the quality of life for survivors.

## MFTHODOLOGY

The evidence-based 6-week TIY program was implemented at a local shelter and survivor advocacy center. Baseline assessments were completed before the start of the TIY program and again after each class attended.

## RESULTS

Self-reported quality of life and presence of trauma symptoms were measured using quantitative data from an anonymous Qualtrics survey that included the Quality-of-Life Survey (QOLS) and Trauma Screening Questionnaire (TSQ). Survey results indicated a reduction in trauma symptoms and increased quality-of-life scores supporting using the TIY program to improve outcomes for trauma survivors.

## IMPLICATIONS FOR PRACTICE

TIY programs appear to improve the survivor's ability to remain in the window of tolerance between hyper and hypo arousal through downregulating practices which help restore a sense of power and control while re-establishing a sense of safety within the body, all of which are critical to bridging a gap in treatment, combating mind-body dichotomies existing within traditional treatment, and eliminating significant barriers survivors face when seeking trauma treatment.

## PROJECT CONSULTANT

Megan Talamantez BS, Executive Director

## FACULTY LEAD



## KASEY GRUBB

DNP EXECUTIVE LEADERSHIP, RN, CNE

ANNIE TAYLOR DEE

NURSING

## Expanding Patient Cancer Care in a Community Hospital Through a Cancer Nurse Navigator

## **PURPOSE**

This quality improvement project aims to integrate the Academy of Oncology Nurse & Patient Navigators (AONN) guidelines, tracking metrics, and physician feedback about patient-needed resources to implement an Oncology Nurse Navigator (ONN) Care Model to expand current cancer patient care processes.

## METHODOLOGY

Physicians were surveyed for needed patient resources, knowledge about the ONN role, and satisfaction with ONN care outcomes. Creation of an ONN Care Model and role definition of the ONN were defined for facility needs and improvement. Physician post-surveys and qualitative data were gathered. Aggregated data was gained through anonymous surveys.

## **RESULTS**

Post-survey results indicated that improvements were needed to expand the ONN role. Qualitative data suggests that using an ONN care model and metric tracking would benefit patient care and the multidisciplinary team.

## IMPLICATIONS FOR PRACTICE

Defining and Implementing an ONN Care Model and Role and Responsibility Program increased the multidisciplinary awareness and resources of current evidence-based practices.

## PROJECT CONSULTANT

Dena Eckardt MSN. RN. BCEN. AEMT

## FACULTY LEAD



## MISTY HASTINGS DNP EXECUTIVE LEADERSHIP. APRN, CRNA ANNIE TAYLOR DEE NURSING

## Reducing Health Literacy Disparities of Outpatient Procedure Patients

## **PURPOSE**

This project aims to reduce health literacy disparities of outpatient procedure patients. One element for neglecting instruction compliance is low health literacy levels. By educating medical providers about low health literacy and its consequences in the perioperative setting, providers can help to increase patients' understanding of preprocedural instructions.

## **METHODOLOGY**

An educational presentation regarding health literacy was given to the Advanced Practice Providers working at the Endoscopy Center of Western New York. The provider's knowledge was surveyed both prior to and following the presentation for comparison, and a follow-up questionnaire was utilized to evaluate personal practice changes resulting from the education.

## **RESULTS**

This collaboration resulted in an 83% increase in the providers' understanding of health literacy limitations. The project was shown to reduce the delays and cancellations seen in the outpatient center by 30% and 35.7%, respectively, according to quarterly reports.

## IMPLICATIONS FOR PRACTICE

Practicing with health literacy limitations in mind can ensure fewer communication inequalities between patients and providers. The project's findings support a gap in medical providers' awareness of this issue, and that education can impact patients' understanding of the instructions provided.

## PROJECT CONSULTANT

Siddhartha Shah MD

## **FACULTY LEAD**

## **VALERIE JACOBS** DNP EXECUTIVE LEADERSHIP. APRN, FNP, BC

ANNIE TAYLOR DEE

NURSING

## Homebound Geriatric Patients with Onychomycosis: Non-Toxic, Safe, Conservative Treatment in the Home

## **PURPOSE**

The project's focus was to provide home-based toenail care to the geriatric patient population. The project involved implementing a conservative, evidence-based toenail care procedure that could be performed by family practice providers for patients in their homes.

## METHODOLOGY

A survey was used pre and post-toenail procedure to assess a patient's reported quality of life. The Rand-36 Quality of Life Survey was given to patients with onychomycosis before the toenail trimming procedure was performed. A follow-up survey was given within three months post-procedure to determine if the quality of life scores had improved. Data were analyzed through the Qualtrics survey platform.

## **RESULTS**

Twenty-two geriatric patients with onychomycosis participated in this study, and all participants completed the pre and post-toenail procedure surveys. Data revealed improvements in self-reported quality of life scores after receiving toenail services from the mobile family practice providers.

## IMPLICATIONS FOR PRACTICE

A mobile physician group, is an ideal model for delivering toenail services for homebound geriatric patients with healthcare access disparities. Project findings promote and support mobile primary care provider-administered toenail procedures for patients in their homes. Performing regular toenail and foot care can improve quality of life.

## PROJECT CONSULTANT

Brian Peterson PA-C

## **FACULTY LEAD**

## ANNE KENDRICK DNP EXECUTIVE LEADERSHIP, RN. CNE ANNIE TAYLOR DEE NURSING

## Implementation of Virtual Simulation Into Clinical Learning Experiences for Family Nurse Practitioner Students

## **PURPOSE**

The project aimed to integrate virtual simulation (VS) into didactic courses in a DNP-FNP program to supplement clinical experiences that were not consistently available in pediatric, women's health, and mental health settings. In preparation for VS implementation, DNP-FNP faculty received training on simulation basics, such as facilitating, debriefing, and promoting learning in simulation and VS.

## METHODOLOGY

The faculty simulation training was presented on the basics of simulation, VS, and the application of VS into the curriculum, including a post-VS discussion assignment template. The faculty also participated in a mid-fidelity simulation and scenario debriefing. In addition, two pre- and post-survey assessments were administered to assess faculty attitudes and the adoption of simulation.

## RESULTS

The post-survey results indicated that faculty had an increased perception of simulation's positive effects on students' learning. Faculty also improved their knowledge and adoption of simulation. In addition, faculty had an increased belief that learning about simulation prepared them to implement VS, positively affecting students' clinical judgment skills.

## IMPLICATIONS FOR PRACTICE

The faculty's comfort level with facilitating and debriefing simulation, including VS, improved after the training, so faculty were more prepared to implement VS into the DNP-FNP curriculum. Faculty used the post-VS discussion assignment template in the curriculum to facilitate student debriefing through reflection questions and an online discussion. VS scenarios implemented into the curriculum focused on pediatrics, women's health, and mental health to improve the clinical preparedness of DNP-FNP students.

## PROJECT CONSULTANT

Melissa Neville Norton DNP. APRN. CPNP-PC. CNE

## FACULTY LEAD

Kristy Baron PhD, RN

# CHELSEA PIKE DNP EXECUTIVE LEADERSHIP, RN, CNE

ANNIE TAYLOR DEE

NURSING

## Implementation of a Pediatric Celiac Disease Care Process Model

## **PURPOSE**

Lack of consistent care for children with celiac disease (CD) can lead to poor health outcomes due to diagnostic delays, misdiagnoses, and incomplete monitoring. Therefore, physicians in a pediatric clinic requested guidance for recognizing, diagnosing, and treating CD in children. This project aimed to create and introduce an evidence-based pediatric care process model to facilitate standardization of care among pediatric patients with CD.

## METHODOLOGY

Interventions aimed to recommend, implement, and evaluate a pediatric CD care process model for use in a pediatric clinic. Collaboration with a CD content expert and a pediatrician from the intended clinic was essential to ensure the model's accuracy and applicability. The model was introduced to the physicians with a PowerPoint presentation, including pre- and post-surveys, to measure the change in pediatricians' comfort in managing pediatric CD.

## RESULTS

Quantitative survey results (n=4) showed increased physician comfort in managing pediatric CD. Similar qualitative results were obtained from physician feedback during the presentation.

## IMPLICATIONS FOR PRACTICE

Implementing this care process model can decrease specialist referrals and reduce diagnostic delays for many children with CD. The model outlines consistent and evidence-based disease management to improve outcomes for children. The model was given to a second pediatric clinic within Intermountain Health and may be presented to the organization's pediatric service line team to determine if application within other pediatric clinics is appropriate. Pediatricians' consistent use of the care process model can improve children's health.

## PROJECT CONSULTANT

Carrie Johnson MD

## FACULTY LEAD

Kristy Baron PhD, RN

## ALISHA **RICHINS** DNP EXECUTIVE LEADERSHIP. APRN, FNP, ACHPN ANNIE TAYLOR DEE NURSING

## Implementation of Education for Hospice Nurses at Inspiration Home Health and Hospice to Improve Knowledge, Attitudes, and Skills

## **PURPOSE**

The purpose of this project is to provide education for nurses working with hospice companies will allow them to retain nurses to care for the dying as the population ages and hospice utilization increases.

## METHODOLOGY

A needs gap analysis identified a deficit in organized education for the hospice nurses leading to a risk of inability to maintain competence and skills when caring for the terminally ill. A literature review was performed and included descriptive studies, systematic reviews, qualitative studies, quantitative studies, and guidelines this was then used as a basis for best practices for the project.

## **RESULTS**

Five nurses participated as the pilot group. This project shows how implementing an education program using end-of-life nursing consortium modules at a Utah hospice company improved competence and knowledge in nurses caring for the terminally ill and dying.

## IMPLICATIONS FOR PRACTICE

This project will provide nurses working at Inspiration Home Health and Hospice with education and training to enhance patient care and improve job satisfaction by applying skills from the National Coalition for Hospice and Palliative Care practice guidelines.

## PROJECT CONSULTANT

Justin Mansfield MD. FAAHPM

## FACULTY LEAD

## TRACY SCHAFFER DNP EXECUTIVE LEADERSHIP, RN. NEA-BC ANNIE TAYLOR DEE NURSING

## Implementation of a Post Disaster Recovery Protocol for Tooele County, Utah

## **PURPOSE**

When a disaster occurs, a community is impacted in many ways. Developing a Family Assistance Center plan and training a community ensures a community is better prepared post-disaster. This project aimed to provide a continuum of care for Tooele County residents to meet the needs of those affected by a disaster.

## METHODOLOGY

A discussion with Tooele County Emergency Management identified a need to develop a Family Assistance Center plan and provide training to stakeholders in a rural community. A Family Assistance Center plan was implemented, and key stakeholders in Tooele County were instructed to follow a standardized approach to disaster recovery.

## RESULTS

Tooele County, Utah, adopted the Family Assistance Center plan. Pre-survey results from training participants indicated (n=13) a lack of knowledge about the importance of a Family Assistance plan and how it could aid a community's recovery efforts post-disaster. However, after training was provided, 100% of the participants reported (n=8) adequate knowledge about the significance of a Family Assistance Center plan. Additionally, 100% of the participants said the disaster recovery plan improved their preparedness.

## IMPLICATIONS FOR PRACTICE

Developing a disaster recovery protocol with a Family Assistance Center will ensure that Tooele County, Utah, is prepared. A Family Assistance Center will provide access to services essential to recovery in the immediate aftermath of a disaster.

## PROJECT CONSULTANT

Bucky Whitehouse MS, MEP, UCEM

## **FACULTY LEAD**

## JOANN TOLMAN DNP EXECUTIVE LEADERSHIP, RN. CNE ANNIE TAYLOR DEE NURSING

## Mentoring New Members in Professional Organizations

## **PURPOSE**

The project's focus was to foster engagement and retention of new members in a professional organization that develops nurse leaders. The project involved implementing a mentoring program to engage new members in a local chapter of an international professional nursing organization to sustain the mission of improving healthcare globally.

## METHODOLOGY

Jean Watson's Philosophy and Science of Caring theory provided the framework for the project. The program used active members to mentor new members using suggestions from the Mentor Interaction Guide, such as sharing chapter events, upcoming activities, newsletters, and social media connections through email messages, phone calls, and face-to-face conversations. Mentors listed each interaction with their new member on the Mentor Tracking Tool. After four months of mentoring, new members completed the Nu Nu Chapter Member Survey to obtain data on engagement, inclusion, and likelihood of renewing membership.

## RESULTS

After four months of mentoring, survey results indicated that new members find personal contacts meaningful and feel included in chapter activities. Further findings show that new members engaged with the organization by visiting social media or the chapter website and reading a chapter newsletter. Finally, 60% of new members said they would likely renew their membership in the organization.

## IMPLICATIONS FOR PRACTICE

New members of professional organizations are positively influenced by mentors who share information and encourage participation with the organization. Project findings promote mentoring as a strategy to obtain positive outcomes on member engagement, inclusion, and the likelihood of renewing membership. In addition, this volunteer-based program is sustainable and adaptable to other professional organizations that contribute to nursing leadership and healthcare delivery.

## PROJECT CONSULTANT

Angela Page DNP, APRN, PPCNP-BC

## FACULTY LEAD

## PATRICIA ANN WELLER DNP EXECUTIVE LEADERSHIP RN ANNIE TAYLOR DEE NURSING

## Guidelines for the Proper Utilization of the PureWick™ External Female Catheter to Promote Positive Patient Outcomes and Prevent Harm

## **PURPOSE**

This quality improvement project aimed to educate nursing staff on the evidence-based procedures to safely initiate, manage and supervise the use of the PureWick $^{\text{TM}}$  device.

## **METHODOLOGY**

A two-month observation study of nursing staff behaviors identified the lack of proper training and knowledge to manage the PureWick $^{\text{TM}}$ , posing risk for harm safely. An evidence-based educational training program was developed and delivered to nursing staff on an inpatient rehabilitation unit who incorporate the PureWick $^{\text{TM}}$  into their practice. Additionally, an algorithm was developed and associated with a quick response (QR) code to allow decision-making or troubleshooting.

## RESULTS

A quasi-experimental design utilized a pretest and post-test strategy to collect quantitative data to determine intervention effectiveness. Qualtrics survey results indicate increases in learning in key safety areas. For example, one pretest question's Std deviation was 0.49, post-test Standard deviation was 0.26.

## IMPLICATIONS FOR PRACTICE

Implementing an evidence-based PureWick<sup>TM</sup> training program provides the education required to incorporate the device safely into practice. Safe practice behaviors reduce the risk of harm to patients and nursing staff.

## PROJECT CONSULTANT

Roxanne Butterfield DNP. RN. CRRN

## **FACULTY LEAD**

## **NANCY THERESA** WESTON DNP EXECUTIVE LEADERSHIP, RN. CNE ANNIE TAYLOR DEE NURSING

## Promoting Inclusive Nursing Care for Lesbian, Gay, Bisexual, Transgender, and Queer Patients

## **PURPOSE**

Nursing education should reflect the needs of the population it serves. People identifying as lesbian, gay, bisexual, transgender, and queer (LGBTQ+) have increased over the past few years, with continued growth expected. Consequently, nursing faculty need the necessary knowledge, skills, and attitudes to teach nursing students to provide quality nursing care to LGBTQ+ patients who are less likely to receive equitable health care because they are members of a diverse population. Therefore, addressing their healthcare needs in the nursing curriculum is essential in alleviating healthcare barriers and biases.

## METHODOLOGY

The equity, diversity, and inclusion (EDI) guidelines were presented to the nursing faculty, applied by simulation course chairs in clinical simulations, and used to review the associate degree nursing (ADN) program student application to encourage qualified applicant diversity. Qualtrics quantitative pre- and post-survey questions were offered to nursing faculty to assess faculty comfort in teaching nursing students how to support LGBTQ+ healthcare needs and the importance of including EDI in the nursing curriculum. In addition, the simulation course chairs and ADN director were asked verbal qualitative survey question(s).

## RESULTS

Overall, nursing faculty were receptive to increasing EDI in the curriculum, simulation, and ADN application.

## IMPLICATIONS FOR PRACTICE

Utilizing the Nursing EDI Guidelines for the LGBTQ+ Population increase faculty awareness and address healthcare disparities to bridge a nursing education gap. The guidelines are a resource accessible online, aiding nursing faculty in incorporating EDI into the nursing curriculum.

## PROJECT CONSULTANT

Kathleen Cadman PhD. RN. RAC-CT. CNE

## **FACULTY LEAD**

Kristy Baron PhD, RN



Dumke College of Health Professions





