



WEBER STATE UNIVERSITY
Dumke College of Health Professions

ANNIE TAYLOR DEE — SCHOOL OF — **NURSING**



DOCTOR OF NURSING PRACTICE

*Graduate
Projects*

SPRING 2025

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 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

School of Nursing 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 Watkins Jeffrey

PhD, RN

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

Faculty Remarks

Congratulations! Working alongside you as you finished your DNP projects has been a pleasure. Your hard work, dedication, and perseverance have not gone unnoticed. I'm inspired by your achievements and the incredible work you will do for patients and communities throughout your career. I'm excited to see what you'll do next!

Caitlin Campbell

PhD, RN
Instructor

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

Congratulations to our Weber State University Doctor of Nursing Practice graduates! Your commitment to excellence and your innovative approaches to improving healthcare have been nothing short of inspiring. Your efforts in advancing patient care and fostering positive change in nursing are a testament to your hard work and passion. As you step into this new chapter, continue to lead with compassion and vision. I am honored to have witnessed your journey—congratulations on your remarkable achievement!

Chelsea Pike

DNP, RN, CNE
DNP Executive Leadership Assistant Director,
Assistant Professor

Doctor of Nursing Practice Faculty and Staff

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Associate Professor

Catie Weimer

Graduate Programs Clinical
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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!

Bon Secours Mercy Health - Southside Medical Center

George E. Wahlen Department of Veterans Affairs Medical Center

Intermountain Health - Intermountain Medical Center

Intermountain Health - McKay-Dee Hospital

Joyce University of Nursing and Health Sciences

Navy Medicine Readiness and Training Command - Portsmouth, Virginia

Navy Medicine Readiness and Training Command - Rota, Spain

Solstice Home Health and Hospice

Uintah Basin Medical Center

Utah Action Coalition for Health

VA Salt Lake City Healthcare System

Weber State University

Weber State University - Annie Taylor Dee School of Nursing

Weber State University - Counseling and Psychological Services Center

Weber State University - Dumke College of Health Professions

Weber State University - Student Health and Wellness



Improving the Consultation Process in an Arrhythmia Specialty Clinic



**JESSICA
BAIRD**

**DNP, APRN,
FNP-C**

**EXECUTIVE
LEADERSHIP**

ANNIE TAYLOR DEE
SCHOOL OF
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PURPOSE

This evidence-based quality improvement project aimed to improve and clarify the referral process for patients with atrial fibrillation (AF) and enhance the knowledge and confidence of primary care providers (PCPs) caring for veterans with AF at a local medical center.

METHODOLOGY

A multi-faceted intervention included identifying new Arrhythmia Clinic provider expectations, updating the clinic consult template, and educating PCPs about initial AF treatment and Arrhythmia Clinic consultation requirements. The educational component was attended by 25 PCPs, where pre- ($N = 18$) and post-education ($N = 7$) surveys were completed to measure their confidence and knowledge.

RESULTS

The post-educational survey results demonstrated a four to 17% improvement in PCP knowledge of AF management. PCPs also reported being more confident in all areas.

IMPLICATIONS FOR PRACTICE

Improving specialty clinic consultation processes and conducting PCP education regarding AF can increase PCPs' knowledge base and confidence levels. Further investigation is needed to determine whether these interventions will also decrease wait times for specialty clinic appointments and improve patient outcomes.

PROJECT CONSULTANT

Amy Anderson, DNP, APRN

FACULTY LEAD

Chelsea Pike, DNP, RN, CNE

Increasing Nurses' Psychological Safety by Implementing a Comprehensive Unit-Based Safety Program Tool



**LYNDSAY
BOONE**

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PURPOSE

This evidence-based quality improvement project aimed to implement a comprehensive unit-based safety program (CUSP) incorporating the I-PASS handoff tool to empower nurses, foster a culture of safety, and promote psychological safety.

METHODOLOGY

A CUSP hand-off tool was implemented for nursing staff, and its impact on psychological safety was evaluated. A pre-survey using AHRQ questions was administered to 27 nurses to assess baseline psychological safety. A mid-pulse survey was conducted to evaluate progress, and qualitative feedback was collected throughout to inform any necessary adjustments. A post-survey was completed after the implementation of the CUSP toolkit.

RESULTS

Pre-intervention, 32% of nurses reported being always informed of safety events on the unit, and 30% felt that hospital management demonstrated a strong commitment to patient safety. After the intervention, 47% of nurses reported being always informed of safety events, and 63% agreed that hospital management's actions reflected a top priority on patient safety. Nurses rated their responses higher on the Likert scale in pre- and post-surveys.

IMPLICATIONS FOR PRACTICE

This project demonstrated that an evidence-based handoff tool enhanced nurses' psychological safety through the structured approach to prioritizing patient safety.

PROJECT CONSULTANT

Carol Gabala, MSN, RN, NPD-BC

Stephanie McConnell, MSN, RNC-OB, CPPS

FACULTY LEAD

Anne Kendrick, DNP, RN, CNE

Wound Clinic Referrals for Diabetic Patients: Implementation of an Evidence-Based Practice Guideline

PURPOSE

This project aims to improve the timeliness of referrals for patients with diabetic wounds to a wound specialist by implementing an evidence-based practice guideline for primary care providers (PCPs). The long-term project goal was to increase the number of early and on-time referrals to a wound specialist from PCPs treating patients with diabetic wounds.

METHODOLOGY

An evidence-based practice guideline was developed and distributed to PCPs to facilitate timely referrals of patients with diabetic wounds. A survey based on the AGREE GRS tool was sent to the participating PCPs to evaluate the new practice guidelines three months after implementation. Over a six-month period, patient referrals from PCPs to a wound specialist were categorized as on-time, early, or late, and pre-implementation referrals were compared to post-implementation referrals.

RESULTS

Five PCPs provided qualitative feedback pre-implementation, which was used to improve the practice guidelines. The post-implementation survey showed that the new practice guideline was developed systematically using evidence and has clinical validity. Referral data collected pre- and post-implementation showed an increase in early referrals and a decrease in late referrals.

IMPLICATIONS FOR PRACTICE

Implementing an evidence-based guideline assisted PCPs in referring diabetic patients with a wound to a wound specialist sooner, which has been shown to improve patient outcomes. This diabetic wound practice guideline may assist other healthcare providers and administrators in improving patient referral timeliness.

PROJECT CONSULTANT

Dr. John Blake, MD

FACULTY LEAD

Carrie Watkins Jeffrey, PhD, RN



**TANYA SARAH
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Implementation of a Preceptor Development Program: An Initiative to Enhance the New Graduate Nurse Orientation Experience



**AMBER D.
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PURPOSE

The purpose of this project was to implement a preceptor development program to increase New Graduate Nurse (NGN) satisfaction, intention to stay, perception of preceptor support, and self-efficacy related to the nursing role during the transition-to-practice program (TTP).

METHODOLOGY

To implement this program development project, the team created a Preceptor Development Program with a SharePoint resource site, including preceptor support tools and advanced training resources for preceptors. The Casey-Fink Graduate Nurse Experience Survey® was utilized to measure project outcomes—specifically, questions within the survey related to perceptions of preceptor support, confidence in nursing role, and role satisfaction.

RESULTS

Post-intervention, respondents reported overall improvement in role satisfaction, intention to stay, perceptions of preceptor support, and self-efficacy related to the nursing role. Post-intervention scoring (n=5) showed a 10% increase in satisfaction, and 100% of current NGNs reported intention to stay during supervisor check-ins. Post-intervention, 7% to 25% increases were noted in the preceptor perception questions. Additionally, 100% of NGNs postintervention reported comfort in delegating tasks to nursing assistants and in completing patient care tasks on time.

IMPLICATIONS FOR PRACTICE

After implementation of the program, there were increases in NGN satisfaction, intention to stay, perceptions of preceptor support, and self-efficacy. The organization plans to sustain the program and monitor the effectiveness of specified outcomes.

PROJECT CONSULTANTS

Shelley Granger, MHA, BSN, RN

FACULTY LEAD

Caitlin Campbell, PhD, RN

Development of a Position Description for the Nursing Informatics Role in Military Treatment Settings



**SHANNON L.
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PURPOSE

The purpose of this strategic plan and needs assessment was to establish a Chief Nursing Informatics Officer (CNIO) position description in Military Treatment Facilities (MTFs) to enhance role clarity, optimize utilization, and improve productivity based on a comprehensive needs assessment and current evidence and standards.

METHODOLOGY

A needs assessment was conducted with input from CNIOs, nurses, leaders, and a consultant working in MTFs to identify current practices and gaps. The findings guided the development of a CNIO position description. Once developed, the CNIOs and consultant were asked to provide feedback and suggestions on the proposed position description. This feedback was incorporated to ensure the role aligns with the needs of the MTFs and supports effective CNIO utilization.

RESULTS

The DNP project developed a position description for the CNIO in MTFs. The needs assessment identified gaps specifically in regulatory initiatives, systems development, and policy development, leading to the creation of responsibilities that enhance role clarity, utilization, and productivity. The finalized position description, with focus areas specifically on health information technology, operational readiness, and collaboration, was submitted for approval to the U.S. Navy Nurse Corps Informatics Specialty Leader and the U.S. Navy Nurse Corps Chiefs Office.

IMPLICATIONS FOR PRACTICE

The DNP project developed a job description to establish a formal CNIO role with defined role and responsibilities tailored to the military healthcare setting, enhancing its utilization, productivity, and recognition in nursing informatics.

PROJECT CONSULTANT

Rebeca S. Rodriguez, MSM, RN, CMSRN, NE-BC

FACULTY LEAD

Mary Anne Reynolds, PhD, RN, ACNS-BC

Implementation of a Clinical Toolkit for Nurse Educators to Cultivate Clinical Judgment in Undergraduate Students

PURPOSE

This quality improvement project aimed to increase clinical nurse educator confidence in promoting and evaluating the clinical judgment skills of student nurses by implementing a toolkit of evidence-based practices for promoting and assessing clinical judgment skills.

METHODOLOGY

A toolkit of interventions for cultivating and assessing clinical judgment skills in the clinical setting was created. Faculty were educated on the toolkit and the interventions were implemented. A survey was administered before and after the implementation, which assessed faculty knowledge of evidence-based practices that improve clinical judgment, confidence in their ability to teach and evaluate clinical judgment skills, and toolkit effectiveness.

RESULTS

Using the clinical toolkit improved faculty understanding of clinical judgment and confidence in assessing clinical judgment skills in students. Faculty strongly agreed that the content of the clinical toolkit was relevant and organized and provided actionable behaviors to improve clinical judgment, and they would recommend the toolkit to their colleagues.

IMPLICATIONS FOR PRACTICE

Using a toolkit with evidence-based interventions for developing clinical judgment skills of nursing students helps nursing faculty understand the components of clinical judgment, increase knowledge of interventions that develop clinical judgment skills, and more confidently assess clinical judgment skills during clinical rotations.

PROJECT CONSULTANT

Carrie Watkins Jeffrey, PhD, RN

FACULTY LEAD

Anne Kendrick, DNP, RN, CNE



**JAYLYNN
FITZGERALD
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A Strategic Plan to Improve Mental Health Resource Utilization in a College of Health Professions

PURPOSE

This evidence based strategic plan aims to increase mental health resource utilization in a College of Health Professions by assessing hesitancies and implementing solutions to increase faculty engagement in supporting student mental health.

METHODOLOGY

A multi-faceted intervention was implemented consisting of surveying all parties within a College of Health Professions on resources, making resources easier to utilize and implement, and identifying solutions. A total of 133 students, 84 faculty/staff, 11 department chairs, and 1 dean were surveyed in a data collection.

RESULTS

A total 55% of faculty agree or strongly agree that supporting student mental health is part of their role. However, 56% of faculty currently do not implement resources into their instruction, but are open to the idea. The faculty's top suggested solution was to centralize resources and provide a tutorial on when to integrate the resources. A flow chart was created and disseminated through the college and Psychological Services Center to assist in symptom recognition and resource utilization. Lastly, new faculty assignments were constructed to educate faculty.

IMPLICATIONS FOR PRACTICE

This project demonstrated that faculty desire to support student mental health and given the necessary tools, they are supportive of implementing resources into instruction.

PROJECT CONSULTANT

Travis Price, PhD, MLS (ASCP)

FACULTY LEAD

Amber Fowler, DNP, RN



**MADDISON
JOHNSTON**

DNP, RN

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Development of a Comprehensive Interprofessional Education Strategic Plan: An Academic Quality Improvement Project



**LAURA K.
JONES**

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PURPOSE

To assess readiness for Interprofessional Education (IPE) implementation and develop a strategic plan to provide high-quality IPE programming in higher education for students in the health professions and align academic practice with IPE evidence-based practice.

METHODOLOGY

A literature review was conducted to identify evidence of the need for IPE and obtain stakeholders' buy-in. Results of a needs assessment mixed-method survey that assessed IPE readiness, accreditation requirements, and departmental IPE preferences, in addition to best practices from the literature, informed the development of an IPE strategic plan. Leaders and faculty from the college then completed an online survey collecting quantitative data on IPE implementation readiness and qualitative feedback on the strategic plan.

RESULTS

Survey results were analyzed and showed a marked increase in IPE readiness. Participants also provided feedback on the preliminary strategic plan. Data and feedback were reviewed by the IPE Committee and adjustments were discussed and instituted. The IPE committee voted to move forward on strategic plan implementation, and measures are being taken to ensure administration and leader support.

IMPLICATIONS FOR PRACTICE

Using evidence that supports the implementation of IPE, conducting a needs assessment, and developing a strategic plan provides a pathway for a robust academic IPE program, which ensures that students are workforce-ready and gain practical experience in interprofessional collaboration.

PROJECT CONSULTANT

Justin R. Rhees, EdD, MS, MLS (ASCP), SBB
Tiffany Hood, PhD, RN, CNE, CNOR

FACULTY LEADS

Carrie Watkins Jeffrey, PhD, RN

Defining the Perioperative Nurse Liaison Role: A Quality Improvement Toolkit

PURPOSE

This project aims to improve the quality of care in the surgical setting by defining the perioperative nurse liaison role and developing a quality improvement toolkit. The toolkit will serve as a resource for nurse liaisons and surgical staff, helping them understand the role and its benefits to patient care.

METHODOLOGY

The project team created a quality improvement toolkit with evidence-based guidelines, communication strategies, training materials, and role-specific protocols. Before implementation, nurse liaisons participated in a focus group interview, completed training on the toolkit, and then participated in a post-implementation focus group and a Qualtrics survey to evaluate its effectiveness.

RESULTS

Post-implementation focus groups highlighted improved role clarity, resource utilization, and satisfaction. Survey results indicated that 80% strongly agreed the toolkit was clear and easy to navigate, and 70% strongly agreed and 30% agreed it was relevant to their responsibilities, boosted confidence, and improved quality care.

IMPLICATIONS FOR PRACTICE

The perioperative nurse liaison toolkit standardized the nurse liaison role, improving communication and collaboration in a surgical department in the Mountain West region and clarifying roles and providing resources enhanced operational efficiency and supported quality, patient-centered care.

PROJECT CONSULTANT

Ronda Chilson, MSN, RN, CNOR

FACULTY LEAD

Carrie Watkins Jeffrey, PhD, RN



**GINGER
MATKIN**

DNP, RN

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LEADERSHIP**

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Implementation of a Clinical Practice Guideline for Emergency Department Nurses to Prevent Awareness With Paralysis in Patients



**KYRA
NEELEY**

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PURPOSE

This evidence-based quality improvement project aimed to reduce the occurrence of awareness with paralysis (AWP) and prevent the associated side effects. This project was implemented in a hospital setting by writing a clinical practice guideline, providing staff education, and modifying patient care.

METHODOLOGY

A clinical practice guideline was written and evaluated using the AGREE II instrument. A presentation on AWP was presented to registered nurses in the emergency department. A pre- and post-survey analyzed the knowledge of the registered nurses before and after receiving the information. A total of 47 nurses chose to participate in the surveys.

RESULTS

Pre-intervention, the nurse's knowledge was minimal about AWP. Post-intervention, the nurse's knowledge about AWP increased, and they felt confident in implementing the guideline and that it would improve patient care.

IMPLICATIONS FOR PRACTICE

This project demonstrated that there may be a poor understanding of AWP in the emergency department setting. The clinical practice guideline provides a comprehensive, evidence-based prevention protocol that may reduce the occurrence of AWP.

PROJECT CONSULTANT

Kevin Myers, PharmD

FACULTY LEAD

Anne Kendrick, DNP, RN, CNE

Implementation of a Medication Error Reporting Process for Faculty and Students in a School of Nursing



**TYANDRA
SUMMER
PEREZ**

DNP, RN, CNE

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PURPOSE

This quality improvement project aimed to encourage consistency, transparency, and support for students and faculty when medication errors (MEs) occur by implementing a standardized ME reporting process.

METHODOLOGY

An ME reporting process was implemented that included a school of nursing incident reporting system, a debriefing tool, an algorithm to determine student behavior and structured support for second victims. First and second semester clinical faculty were trained on the new process. Faculty surveys were administered pre- and post-training ($N = 16$) to assess confidence in addressing MEs with students. ME incident report data collection is ongoing.

RESULTS

Analysis of the pre-and post-training data demonstrated that 19% (100%) strongly agreed that they felt confident about the process to follow when a student is involved in an ME. Preliminary data from the ME incident reporting system was inconclusive due to limited responses.

IMPLICATIONS FOR PRACTICE

This project demonstrated that a comprehensive training and standardized process improved faculty confidence in addressing MEs. These findings highlight the importance of providing a well-structured and consistent process for faculty when addressing MEs among student nurses.

PROJECT CONSULTANT

Rieneke Holman, PhD, RN

FACULTY LEAD

Amber Fowler, DNP, RN

Implementation of Child Passenger Safety Resources Within A University Setting

PURPOSE

The aim of this program development and implementation Doctor of Nursing Practice (DNP) project was to assist with developing a child passenger safety (CPS) resource center on a local college university campus. This DNP project focused on developing, marketing, and evaluating the new CPS website and certification of on-site CPS technicians.

METHODOLOGY

The DNP-prepared leader partnered with the Student Health and Wellness Center on campus. Working as a team, evidence was translated into practice using the ACE Star Model of Knowledge Transformation. Utilizing the discovery of the problem and solutions by examining the current evidence, a CPS website was developed and marketed campus-wide that provided safe up-to-date CPS knowledge, current vital statistics, and national/state/local links to reputable CPS websites and locations to get their CSS checked. Website evaluation included feedback on the website's usefulness, additional community needs, improvements and suggestions, and outreach for future CPS activities. In addition, three individuals were recruited and certified to support the CPS center and its planned activities.

RESULTS

The survey data was evaluated one month after the website was opened and marketed. Thirty-five participants completed the survey. 97% learned something new from the website, 94% found the information helpful, 83% found benefits in having an on-campus resource center, and 77% said they would use the resource center, the website, and the CPS planned activities, including a planned fitting station in the future.

IMPLICATIONS FOR PRACTICE

This collaboration has improved access to CPS-related resources. The CPS resources addressed important steps to establishing a comprehensive CPS resource center while addressing significant family/child safety issue needs within a university community. This project also shows that a campus setting as a community can benefit from this CPS resource center and can be a model for other campuses and communities.

PROJECT CONSULTANT

Rochelle Bronson, MHA, MCHES

FACULTY LEAD

Mary Anne Reynolds, PhD, RN, ACNS-BC



**KIMBER
SIMONS**

DNP, RN

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Nurse Well-Being in Home and Hospice Care: A Needs Analysis and Strategic Plan



**JODI
WADDOUPS**

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NPD-BC**

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NURSING

PURPOSE

This project aimed to conduct a home health and hospice needs assessment to establish a baseline measurement of the healthcare team's stress, burnout, and perceived organizational support and to develop a strategic plan addressing the identified gaps.

METHODOLOGY

This project utilized the Model for Improvement (MFI) to collect qualitative and quantitative data, which informed the development of a strategic plan that included evidence-based interventions addressing the identified home health and hospice systemic concerns. The plans prioritized implementing a professional and interpersonal communication charter plan, which included integrating regular well-being assessments. Surveys were administered to measure the leadership team's confidence in implementing each charter plan.

RESULTS

Charter plan survey results ($N = 5$) were positive while revealing improvement areas. Respondents felt confident implementing the charter plans and agreed that the goals aligned with organizational values. Areas for improvement included charter plan dissemination and collaboration.

IMPLICATIONS FOR PRACTICE

This project demonstrates the critical need to understand and address the causes of stress and burnout of healthcare workers. The findings highlight improved communication's potential to enhance the healthcare team's well-being.

PROJECT CONSULTANT

Joan Gallegos, MSW, RN

FACULTY LEAD

Chelsea Pike, DNP, RN, CNE

Toolkit for Clinical Safety Utilizing the Clinical Judgment Model



**MISTY NICOLE
WELLS
SCHREINER**

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PURPOSE

This quality improvement initiative aimed to increase the knowledge of nursing faculty and preceptors on layer three of the clinical judgment model (CJM).

METHODOLOGY

A toolkit intervention based on the CJM was implemented at a nursing university over one semester. The toolkit broke down the six stages based on layer three of the model, providing definitions, examples, and prompts for preceptors or faculty to use with capstone students. Participants completed pre- and post-surveys to assess the toolkit's effectiveness in increasing knowledge of the CJM and the ability to teach it. A mix of nursing faculty and preceptors accounted for this initiative's participants ($N = 14$).

RESULTS

The project results showed a slight improvement in closing the CJM knowledge gap. Ninety-two percent of the participants indicated they would use the toolkit in the future and found its content relevant to their profession.

IMPLICATIONS FOR PRACTICE

The project highlights that a toolkit on the CJM can effectively assist nursing faculty and preceptors in teaching the model to their students. The findings emphasize the need for guidance in breaking down each stage within layer three of the CJM to assist with teaching.

PROJECT CONSULTANT

Clancey Sollis, DNP, RN, CNE, CCRN-K

FACULTY LEAD

Amber Fowler, DNP, RN

Implementation of a Transition of Care Model at a College Counseling Center



**STEPHANIE
WHEATLEY**

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PURPOSE

This quality improvement project aimed to implement a Transition of Care Model (TCM) and student pamphlet (My Path) at a college counseling center (CCC) to support clinician decision-making processes, empower student participation, and enhance campus and community connections.

METHODOLOGY

A multi-faceted intervention was implemented over five months. During a staff meeting, an interactive PowerPoint presentation was used to train CCC employees regarding TCM steps and student pamphlet integration. Following the implementation period, a 13-question survey measured clinician feedback regarding the TCM's ease of use and integration into the CCC workflow, its effect on student quality of care, and overall clinician experience.

RESULTS

Post-intervention survey results ($N = 15$) indicated the TCM was clear and easy to follow (93%), the model's use led to improvements in student safety and quality of care (100%), improved the student experience (93%), and improved the clinician experience (100%).

IMPLICATIONS FOR PRACTICE

Project findings emphasize that a TCM supports the CCC clinical team workflow in navigating decision-making processes, promotes safe and quality student care, and improves clinician and student care experiences.

PROJECT CONSULTANT

Aaron Jeffrey, PhD, LMFT

FACULTY LEAD

Chelsea Pike, DNP, RN, CNE

Congrats to our 2025 DNP Executive Leadership Graduates!



From Everyone At

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