

ANNIE TAYLOR DEE
SCHOOL OF
NURSING

-2021

Doctor

of

Nursing

Practice

PROJECTS

Message from the Dean



Yasmen SimonianPhD, MLS (ASCP)CM, FASAHP

Dean/Presidential Distinguished Professor Dumke College of Health Professions 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 this challenge. And you, graduate, are our success through the opposition.

As the second cohort 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 to 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.

Message from the Chair

Congratulations Wildcats!! Our Annie Taylor Dee School of Nursing is thrilled to join you in celebrating this personal and academic achievement of graduating with your doctorate! As the first graduating class in the Doctor of Nursing Practice-Family Nurse Practitioner (DNP-FNP) track and first doctorate at Weber State University, you are part of a historical moment. This accomplishment is a culmination of many, many hours of sacrifice and hard work. However, it is just the beginning of what will be a successful and rewarding career.

Some advice, as you continue in your quest of lifelong learning and influence our healthcare communities; from one of my favorite books, *The Go-Giver*, by Bob Burg and John David Mann, "Your true worth is determined by how much more you give in value than you take in payment."

May you find value in all your pursuits, both professionally and personally. Thank you for allowing us to be a part of your journey. Our faculty and staff join you in this celebration. I am proud to have you join our nursing family and look forward to the positive impact you will make on our communities. I wish you all the best as you continue to pursue your dreams!!



Sally Cantwell
PhD, RN

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

Program Director Remarks



Melissa NeVille Norton DNP, APRN, CPNP-PC, CNE

Graduate Program Director/Associate Professor Annie Taylor Dee School of Nursing Dumke College of Health Professions Dear Graduates,

Your graduation from the Annie Taylor Dee School of Nursing Doctor of Nursing Practice, Family Nurse Practitioner (FNP) Program Emphasis in the Dumke College of Health Professions is an essential personal and professional milestone and deserving of our sincerest congratulations.

As the first FNP doctoral graduates at Weber State University, many individuals celebrate your accomplishments, including the nursing faculty, leadership, and staff who have worked tirelessly to support your learning and growth. As DNP-FNP graduates, you are prepared to lead healthcare organizations, translate evidence to improve health care outcomes, and advance nursing practice.

We look forward with great anticipation as you advance healthcare locally and nationally.

Congratulations Graduates!

Faculty Remarks



Congratulations to our first graduating cohort of Post BSN to DNP FNP students! It has been an honor and a privilege to work alongside you. I am so appreciative of your patience, good nature, and willingness to provide constructive feedback as the faculty continue to strengthen this program of study based on your input. I wish you nothing but the best as you embark on your new career and look forward to having you act as preceptors for future students! Take care and I have no doubt you'll make a difference!

Ann Rocha
PhD, APRN, FNP-BC
Assistant Professor
Post BSN to DNP-FNP Curriculum Coordinator



It has been such a rewarding experience to work closely with this amazing DNP FNP Cohort. It is exciting to have seen the individual student growth as you have journeyed through your DNP program. I have appreciated the opportunity to have worked closely with this group of students to manage and create positive clinical experiences. Go forth and make a difference with your leadership skills, evidence-based practice knowledge, empathy, and patient connection. Congratulations. Best of luck to all of you future providers. We are in good hands.

Jamie Wankier Randles

MSN, RN

Associate Professor Graduate Program Clinical Coordinator

Doctor of Nursing Practice Faculty

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Kristy Baron

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Kelley Trump

DNP, MSN, RN, CNE, COI Instructor

Kris Williams

DNP, APRN, FNP-C Associate 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 students for a high quality and impactful educational experience.

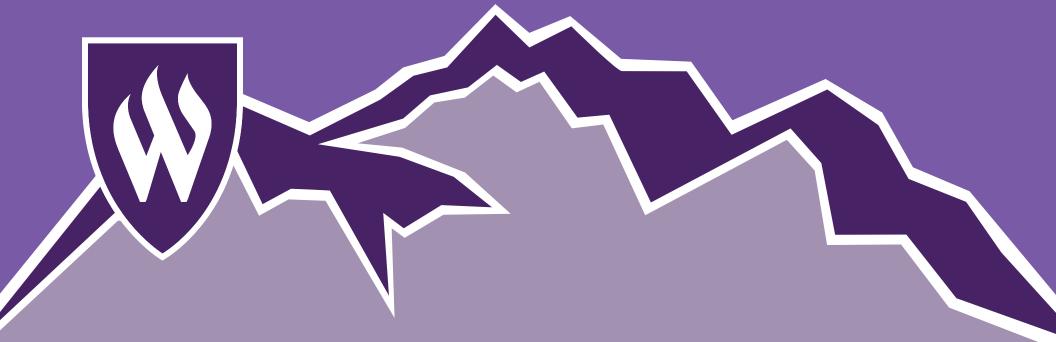
Weber State University aims for a dual mission approach in education by creating community-based learning and public service opportunities, we thank the following organizations for helping us achieve our goal!

Alta View Hospital
Applegate Homecare & Hospice
Ashley Regional Medical Center
Circle of Life Women's Center
Huntsman Cancer Institute
Intermountain Healthcare
Iron County School District
Ogden School District

Uintah Basin Medical Center
Utah Professionals Health Program
Utah Valley Pediatrics
Weber-Morgan Health Department
Weber School District
Weber State University Nursing Faculty
VA Salt Lake City Health Care







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Decreasing Vaping Among Adolescents Using a School-Based Prevention Toolkit for Educators

PURPOSE

Vaping is detrimental to health, yet its use is rapidly expanding among adolescents. However, there is a lack of knowledge about vaping and how it affects health. It is important to educate adolescents to promote healthy decision-making and to prevent vaping initiation. The purpose of this Doctor of Nurse Practice project was to develop and implement a school-based vaping prevention toolkit to increase faculty knowledge and confidence in teaching vaping curriculum and to provide resources to educate students.

METHODOLOGY

A vaping prevention toolkit was developed that consisted of an educational module for teachers to increase personal knowledge about vaping, a 25-minute student education presentation, and a comprehensive resource list. Two educators and forty junior high students were introduced to the toolkit and asked to provide feedback on the perceived effectiveness of the toolkit.

RESULTS

100% of the students agreed that they had learned something new about vaping, and this information would positively influence their choice not to vape. Both participating educators gained new knowledge about vaping and felt more prepared to discuss vaping with their students. Both agreed that the toolkit and resources were user-friendly and would be easy to incorporate into the classroom.

IMPLICATIONS FOR PRACTICE

Vaping rates among adolescents are a significant health care issue. Early education is one way to increase knowledge and encourage teens to avoid vaping. By using evidence-based resources, clinicians can take an active role in educating on the health risk and prevention associated with vaping in adolescence and influencing decision-making.



DESERET ALLEN

DNP-FNP, RN

ANNIE TAYLOR DEE
NURSING

Breast Cancer Transition Pathway for the Huntsman Cancer Institute

PURPOSE

Four in ten women are breast cancer (BC) survivors in America. During the post-cancer phase, patients do not always know what actions they should take to remain healthy. This Doctor of Nursing Project aimed to improve communication and documentation between Huntsman Cancer Institute (HCI) providers and BC survivors during the transition of care by implementing a BC transition pathway program.

METHODOLOGY

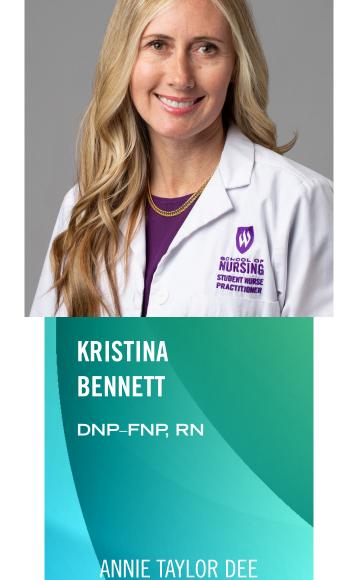
The HCI Survivorship Team created a BC transition pathway program and assessment document to evaluate and direct BC survivors to after-cancer resources. The pathway was based on evidence-based strategies, including clinical practice guidelines, validated evaluation tools, and professional recommendations. The pathway program was designed to bridge the gap between cancer patients and cancer survivors and provide patients with individualized plans of care.

RESULTS

Seven out of nineteen (37%) BC survivors filled out the transition pathway assessment document. Based on the BC survivors' responses, the transition pathway was used to guide patients to follow-up care and identify the long-term effects of cancer treatments. The responses also revealed a significant need for a survivorship clinic. The providers felt that the BC transition pathway improved communication and documentation between them and the patient. The future goal of this project is to integrate the transition pathway permanently into the electronic medical record.

IMPLICATIONS FOR PRACTICE

A BC transition pathway program addressed the significant long-term needs of BC survivors and confirmed the necessity for a survivorship clinic. This project advanced nursing practice at HCl by providing patient-centered survivorship resources to transition BC survivors with appropriate after-cancer resources.



NURSING

Implementation of a Pediatric Early Warning Signs Guideline in a Rural Community Hospital

PURPOSE

Uintah Basin Medical Center (UBMC), a rural community hospital, has infrequent pediatric admissions to the medical-surgical (MS) and intensive care units (ICU). The Pediatric Early Warning Signs (PEWS) tool monitors, detects, and responds to signs of deterioration in hospitalized children. This Doctor of Nursing Practice project implemented a PEWS guideline in the MS and ICU at UBMC to provide an objective measurement tool that assists the nursing staff in identifying early signs of pediatric patient deterioration. Early detection of clinical deterioration improves patient outcomes, helps prevent invasive treatments, and reduces patient transfers.

METHODOLOGY

The PEWS guideline was introduced to 28 nurses and 13 certified nursing assistants (CNAs). PEWS scoring criteria and normal pediatric vital signs were explained and distributed on a badge card for reference. PEWS usage and outcomes, and nursing confidence in detecting

early pediatric clinical deterioration, were evaluated for five months through chart reviews and two nursing surveys.

RESULTS

Thirty-six pediatric patients were admitted to the MS and ICU departments during the evaluation period. 63% of the admissions had PEWS documented. Two pediatric patients were transferred to a higher acuity of care hospital. Overall, nurses and CNAs felt more confident and competent in caring for pediatric patients and recognizing early signs of clinical deterioration after PEWS implementation.

IMPLICATIONS FOR PRACTICE

PEWS assists in the early recognition and response of infrequent pediatric clinical deterioration. PEWS improves nurse confidence and competency in caring for pediatric patients, which is imperative for reducing avoidable transfers and improving pediatric patient care outcomes in rural community hospitals.



ANGALA BRYSON



Improving Future Provider Confidence in Vaccination Discussions Through Simulation Experiences

PURPOSE

The World Health Organization (WHO) listed vaccine-hesitancy as one of the top ten threats to global health in 2019. Provider recommendation is the leading indicator for vaccine acceptance, and effective communication is critical to establishing patient trust and confidence in the provider. The purpose of this Doctor of Nursing Practice (DNP) project was to enhance Weber State University (WSU) Family Nurse Practitioner (FNP) students' vaccination knowledge and communication skills through education and simulation experiences to improve provider knowledge and to increase vaccination rates.

METHODOLOGY

Eighteen WSU DNP-FNP students attended a class focusing on vaccine-preventable diseases, vaccine mechanisms, and recommendation strategies. Students then participated in a vaccination discussion simulation event using written scripts and an algorithm designed by the student DNP-FNP leader. Pre- and post-

tests, including multiple choice and short answer questions, were used to evaluate participant knowledge and confidence levels.

RESULTS

The mean scores on content knowledge increased 6.5% from pre-implementation to post-implementation, while the mean scores for perceived confidence/self-efficacy and knowledge regarding effective vaccination recommendation practices increased 23%.

IMPLICATIONS FOR PRACTICE

Every patient-provider contact is an opportunity to discuss and recommend vaccination. It is crucial for future providers to feel competent and confident in their knowledge and communication skills to increase patient-provider trust and effective vaccination recommendations. Healthcare providers who routinely recommend vaccinations could benefit by having opportunities to practice essential vaccination communication techniques and skills.



LAURA CLYDE



Development of an Evaluator Toolkit for the Utah Professionals Health Program

PURPOSE

10-15% of healthcare providers (HCPs) will struggle with substance use disorders (SUDs) or misuse substances throughout their careers. Since HCPs with SUDs are a safety risk, they must receive prompt treatment. Utah Professionals Health Program (UPHP) provides resources and treatment plans for HCPs. The purpose of this Doctor of Nursing Practice (DNP) project was to provide a toolkit so that UPHP evaluators can assess HCPs with SUD accurately and quickly to determine an appropriate recovery plan.

METHODOLOGY

This DNP project involved creating a toolkit for the UPHP evaluator responsible for assessing HCPs seeking entrance into the program. The toolkit was developed for the UPHP website and provides information and resources about becoming a UPHP evaluator. It also includes a comprehensive evaluation example, intake forms, and guidelines to determine appropriate recovery interventions.

RESULTS

The UPHP executive advisory committee reviewed and unanimously approved the evaluator toolkit. The toolkit was adopted by UPHP and made available on the UPHP website. Feedback from the committee included: the website was easy to navigate; it will increase consistency among UPHP evaluators; and finally, it will help with accurate evaluations for the HCP with SUD.

IMPLICATIONS FOR PRACTICE

The UPHP is an important recovery program for HCPs with SUDs. It offers a confidential, non-punitive approach while assisting the HCP on their road to recovery. Developing and implementing an evaluation toolkit for such programs improves consistency and accurate evaluation and ultimately helps the HCP return safely to practice.



PAIGE ERICKSON





HOLLY C HACKING

DNP-FNP, RN



Implementation of a Diabetes Patient Education Tracking System in a Rural Utah Hospital

PURPOSE

All diabetic patients need self-management education and support. For diabetes education systems to be effective, they must determine patient status, track changes, provide consistent, organized education, follow up with patients, report to referring providers, and report to the accreditation body. The purpose of this Doctor of Nursing Practice (DNP) project was to replace paper documentation with an electronic diabetes education tracking system. Electronic health records improve quality patient outcomes by increasing the efficiency of documentation and data retrieval, and it provides clinical decision support.

METHODOLOGY

Chronicle Diabetes, the electronic data management system designed specifically for diabetes education, was selected for this project. Implementation included working with the Information Technology department, introducing the program to the hospital staff, and completing in-depth education with the diabetes educator.

RESULTS

The training was completed with the diabetes educator, the clinical informatics nurse, and the medical records department. During the data collection phase of the project, thirty-one patients were entered into Chronicle Diabetes. The project's success was demonstrated by the diabetes educator's increase in efficiency of 60-90 minutes per patient. Patients' average A1c's also decreased, and patient and provider communications improved.

IMPLICATIONS FOR PRACTICE

Implementing a diabetes patient tracking system like Chronicle Diabetes improves the consistency of diabetes self-management education and support for patients with diabetes. Well-developed electronic health systems also improve user satisfaction by organizing and streamlining documentation, facilitating patient and provider communication, and enhancing quality care continuity for patients with diabetes.

Improving Vaccination Rates of School-Aged Children in a Rural Community

PURPOSE

Vaccines prevent deadly diseases. Despite success, vaccination rates are critically low for school-aged children in rural Morgan County, Utah. While vaccine hesitancy is often caused by perceptions regarding relative safety and effectiveness, it can also be driven by perceptions of convenience and complacency. The purpose of this Doctor of Nursing Practice project was to address vaccine hesitancy in a multifaceted, tailored approach to increase vaccination rates.

METHODOLOGY

The intent of this project was to improve Morgan Health Department's vaccine clinic accessibility, create an incentive program, distribute vaccine education, and promote vaccines in the community. Parents at the clinic and from a community Facebook page were surveyed to assess the project's impact. Additionally, the number of vaccines administered at the clinic was recorded.

RESULTS

Vaccine administration at the clinic increased from 1 in 2020 to 17 in 2021. All surveyed parents (N=6) at the clinic chose the convenient location in Morgan as a top reason for utilizing the clinic. Reminders and clinic hours were the second highest choices selected. Sixty-nine percent of participants (N=40) on Facebook identified a school email and social media as important, while 28% selected community fliers as the most helpful methods for receiving vaccine information.

IMPLICATIONS FOR PRACTICE

Vaccines provide vital protection against serious illnesses; however, vaccine hesitancy often prevents many from receiving vaccinations. This project addressed vaccine confidence, as well as perceptions of convenience and feelings of complacency to improve vaccination rates so individuals and communities can benefit from the protection that vaccinations provide.



RACHEL HOGGE





CHELSEA HOOPES

DNP-FNP, RN

ANNIE TAYLOR DEE
SCHOOL OF
NURSING

Depression Screening for Adolescents in a Rural Community

PURPOSE

In Utah, depression rates have risen annually since 2013, and in Duchesne County, depression rates are among the highest in the state.

Adolescent patients at Uintah Basin Medical Center (UBMC) clinic were not regularly screened for depression, and local resources were not well utilized. The purpose of this Doctor of Nursing Practice (DNP) project was to improve the diagnosis and treatment of adolescent depression by implementing a depression screening pathway for adolescents ages 12-17 in a pediatric primary care setting.

METHODOLOGY

A mental health pathway was developed using the GLAD-PC guidelines for adolescent depression. Three providers were educated regarding the pathway, including a depression screening tool and referral lists. Adolescent patients presenting to UBMC clinic were screened using the Patient Health Questionaire-9 (PHQ-9). If a patient screened positive, the pathway was initiated, and they

were provided with a referral and/or medication, and a 1-4-week follow-up appointment.

RESULTS

During the year preceding the implementation of this project, only 3% of adolescent patients were screened for depression in the pediatric clinic. After implementing the depression screening pathway, 48% of adolescent patients were screened for depression. Those who screened positive had a 90% referral and follow-up rate.

IMPLICATIONS FOR PRACTICE

Adolescent depression is a global crisis with devastating implications if not diagnosed and treated early. Decreasing adolescent depression rates in Duchesne County can be accomplished through routine screening in a primary care setting. This DNP project demonstrated that regular screening for depression could improve diagnosis and treatment rates for depression in adolescents.

Improving the Competence and Confidence of the Bedside Nurse in Providing Inpatient Diabetes Education

PURPOSE

In the United States, one in ten individuals has diabetes. Diabetes is a significant cause of hospitalization, disabling morbidity, and mortality. Nurses must be prepared to teach patients to safely self-manage their diabetes after discharge. Bedside nurses are often responsible for providing inpatient diabetes education. However, bedside nurses often lack the knowledge, time, and confidence to provide essential diabetes survival skills education (DSSE). The purpose of this Doctor of Nursing Practice (DNP) project was to increase the competence and confidence of the bedside nurse in providing diabetic education to patients using the DSSE model.

METHODOLOGY

The DSSE educational toolkit was developed with the aid of organizational stakeholders and content experts. The diabetes toolkit included a DSSE training session, an education module, a resource binder, and a standardized skills checklist to be used for documentation.

RESULTS

Twenty-three nurses (7 charge/16 bedside) participated in DSSE education implementation, representing 69% of unit nurses. Post project implementation, charge nurses reported a 43% increase in their comfort and confidence in delivering DSSE and a 57% increase in comfort answering patients' questions. Additionally, 81% of bedside nurses reported being comfortable and confident in providing diabetes education and answering patient questions.

IMPLICATIONS FOR PRACTICE

Small hospitals often do not have inpatient diabetic educators, so diabetes education becomes the bedside nurse's responsibility. This DNP project shows that providing bedside and charge nurses with an evidence-based DSSE model is one way to help them feel more comfortable and confident in providing diabetes education to their patients.



JESICA JENSEN



Improving Advance Care Planning by Nurse **Practitioners in the Primary Care Setting**

PURPOSE

Advance care planning (ACP) and advance directives help families and healthcare providers to care for individuals when they cannot speak for themselves. It is estimated that only 26-37% of adults in the U.S. have completed advance directives. Primary care providers often have opportunities to initiate and complete ACP with their patients and their families. However, ACP is not usually part of provider education. The purpose of this Doctor of Nursing Practice project was to develop a manuscript for publication that provides the needed knowledge, skills, and resources for nurse practitioners (NP) and other primary care providers to incorporate ACP within their clinical practices confidently.

METHODOLOGY

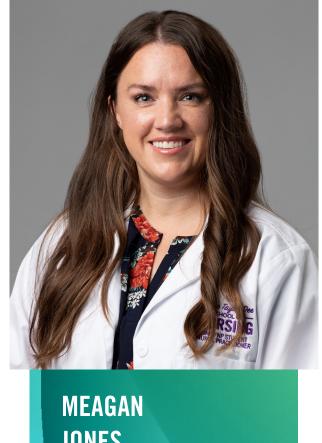
A manuscript was developed addressing what ACP is, the steps to take when discussing ACP with patients, appropriate timing for ACP, and tips and resources for ensuring that high-quality ACP occurs. The manuscript also addresses the importance and utility of advance directives. The manuscript was read and then evaluated by six nurse practitioners.

RESULTS

A survey was distributed to evaluate the relevance and usefulness of the manuscript. The survey included knowledge-based questions and content evaluation questions. After reading the manuscript, knowledge-based question scores averaged 90% and 100% stated they were either very or extremely confident discussing ACP with patients. 60% of the respondents said they would modify their current ACP practices and 40% said they would implement ACP into their practices.

IMPLICATIONS FOR PRACTICE

Advanced care planning is an essential part of healthcare for adult patients. ACP education and resources can improve NP confidence and increase the likelihood of these critical discussions and decisions. A manuscript is an effective tool for educating a large group of nurse practitioners and other providers regarding best practices.



JONES



Decreasing E-cig Use Among High School Adolescents

PURPOSE

Adolescent use of electronic cigarette (e-cig) products has continued to rise across the United States, with Ogden High School having higher than state and national averages. These behaviors can lead to acute and chronic health complications, the development of e-cig or vaping use-associated lung injury (EVALI), continued tobacco use into adulthood, and gateway drug use. The purpose of this Doctor of Nursing Practice project was to create a sustainable toolkit of information for high school educators to include in their curriculum and develop a web-based resource page for teachers and students.

METHODOLOGY

The toolkit included a 60-minute PowerPoint presentation on information related to e-cigs, their harmful health effects, and marketing tactics by tobacco companies towards youth. The toolkit also included a website link to resource information. Teachers evaluated the overall effectiveness of the program and their

willingness to incorporate the toolkit into their curriculum.

RESULTS

Approximately 100 high school students and two teachers were presented the information over two days. The teacher's evaluation of the program noted a high rating in program effectiveness and willingness to incorporate the toolkit into their curriculum. Students were engaged and interactive throughout the presentation. Additionally, the website was visited by almost 80 individuals over five months.

IMPLICATIONS FOR PRACTICE

Screening for e-cig use and providing information and resources is an imperative area for adolescent health prevention. Providers can create or be involved with programs that highlight the negative health effects of e-cig use, dispel myths, and be a resource for community members inquiring about e-cig prevention and cessation.



BRIAN Maynard

DNP-FNP, RN, EMT-P, CEN





MARIANNE MAYO

DNP-FNP, RN



Facilitating Change to Adolescent Eating Habits in a Primary Care Setting

PURPOSE

Healthy eating is important during adolescence (11-18yr), yet poor eating habits are common for this age group and can lead to poor nutrition. Poor nutrition can lead to delayed growth, impaired organ remodeling, preventable chronic diseases, and suboptimal cognitive function. The purpose of this Doctorate of Nursing Practice project was to screen and educate adolescents who might be at risk for poor nutrition by introducing routine screening and by providing healthy eating educational resources.

METHODOLOGY

By implementing an Adolescent Food Habits Checklist (AFHC) screening tool and educational resources at Utah Valley Pediatrics, adolescents at risk for poor nutrition were identified. Primary care providers (PCP) were educated on the use of evidence-based and age-appropriate nutritional education and resources and how to use the results from the AFHC tool to identify those at high risk.

RESULTS

After introducing the screening tool, 84% of adolescents presenting for well check visits (n=101) were screened. Of the 84% screened, 100% received adolescent-appropriate healthy eating resources and education.

IMPLICATIONS FOR PRACTICE

Healthy eating screening and education resources introduced into the primary care setting offer adolescents a systematic approach to developing healthy eating habits. PCP administered screenings can identify at-risk patients and direct providers to address and respond to related undiagnosed nutrition-related problems.

Implementation of a Tuberculosis Education Toolkit for Health Care Providers

PURPOSE

Tuberculosis (TB) poses a public health threat because more than 80% of cases result from asymptomatic and untreated infections. It is estimated that up to 13 million people in the United States have latent TB infection, which has a 5-10% risk of converting to active disease if left untreated. Unfortunately, TB often goes undiagnosed due to a lack of nursing knowledge. This Doctor of Nursing Practice (DNP) project aimed to improve health care providers' understanding of TB by assembling and implementing a toolkit containing evidence-based guidelines and educational materials.

METHODOLOGY

The clinical nursing staff at the Weber-Morgan Health Department (N=17) were given a pretest before receiving a copy of the toolkit, which contained guidelines, educational handouts, and videos. Employees were asked to review the toolkit and begin using it to educate clients receiving TB tests or treatment at the

health department. After the toolkit review, the clinical nursing staff (N=16) received a post-test, satisfaction survey, and utilization questionnaire to evaluate effectiveness.

RESULTS

Pre-test results demonstrated various knowledge gaps, with 88% of the staff responding. Post-tests were completed by 69% of the staff and showed an average score improvement of 11%. The utilization questionnaires and satisfaction surveys demonstrated that 91% of respondents used the toolkit and believed it improved their understanding of TB.

IMPLICATIONS FOR PRACTICE

Appropriate knowledge of TB can improve accurate diagnosis and treatment for patients. The TB education toolkit provided health care providers with tools to increase their understanding of TB and help them to educate patients appropriately.



HEIDI O'NEAL





Burnout Prevention through Teamwork and Communication for Homecare and Hospice Nurses

PURPOSE

Nurse burnout is an epidemic problem in healthcare. Burnout among homecare and hospice nurses results from workplace demands, isolation, and high-stress levels, which can lead to exhaustion. Job stress and isolation contribute to burnout in homecare and hospice nurses. This Doctor of Nursing Practice (DNP) Project aimed to prevent burnout among nurses at Applegate Homecare and Hospice using organizational interventions to improve communication and teamwork.

METHODOLOGY

Using Juran's Trilogy Model, a program designed to increase communication and teamwork among nurses was implemented. Project interventions included introducing a Kudos communication channel, a monthly nurse meeting with activities that helped nurses engage personally, and a quarterly team debriefing. The program was evaluated using pre-and post-surveys, and qualitative responses were collected from nurses and stakeholders.

RESULTS

Nineteen nurses participated in various program interventions. Pre-project interviews indicated that 17% of the nurses had signs of burnout. A comparison of pre-and post-surveys showed no significant improvement in burnout indicators. However, qualitative feedback from fourteen nurses indicated perceptions of an improvement in communication and teamwork. Feedback from the Kudos channel revealed a shift from focusing on individual actions to focusing on team actions.

IMPLICATIONS FOR PRACTICE

Burnout among homecare and hospice nurses can be addressed through organizational interventions that can increase communication and teamwork. Continued education is needed to establish workplace practices that focus on communication and building solid teams.



Roles and Perceptions of Nurse Care Managers During Implementation of Medication Treatment for Opioid Use Disorder National Initiative

PURPOSE

There is a national priority in the US to improve access to medication treatment for opioid use disorder (MOUD). Nurses and nurse care managers (NCMs) have been identified as one group who are considered critical leaders in improving access to MOUD care within general medical settings. The purpose of this project was to determine the perceptions and evolving roles of NCMs who have participated in the national Veterans Health Administration (VHA) MOUD initiative.

METHODOLOGY

From 4/15/2021 to 6/16/2021, NCMs participated in the VHA's Stepped Care for Opioid Use Disorder Train the Trainer (SCOUTT) initiative. After the training, the NCMs were either interviewed or answered questionnaires about their roles, perceptions, and experiences. Two investigators coded the responses, and a consensus was made regarding emerging themes.

RESULTS

Eleven NCMs from ten VHA facilities participated in this study. Several barriers to MOUD implementation were identified, including lack of educational training, inadequate staffing; high provider-to-patient ratios; and time constraints. Factors that were identified as facilitating the change included mentorships, academic resources, and treatment acceptance by patients. Through educational training via the SCOUTT Initiative, NCMs were able to feel more confident in their role and empowered to become subject experts.

IMPLICATIONS FOR PRACTICE

NCMs play a vital role in increasing patient access to MOUD. Confident NCMs may become subject experts and increase role responsibilities while relieving provider burden. Providers can then improve MOUD access by increasing the number of patients able to be seen and treated.



ASHLEY O RADMALL





GABRIELA RAMIREZ

DNP-FNP student, RN



Introducing an After-School Healthy Eating Curriculum for Elementary School Children

PURPOSE

Healthy eating is pivotal for the adequate growth and development of school-age children. Unhealthy eating correlates to poor health outcomes, poor academic performance, and negative psychological consequences over time. The purpose of this Doctor of Nursing Practice (DNP) project was to implement an afterschool healthy eating curriculum at an elementary school in the Ogden School District.

METHODOLOGY

The curriculum was designed to improve the healthy eating knowledge and behaviors at an elementary school in a low-income area. This program was guided by the USDA 2015-2020 nutritional guidelines and the social cognitive theory framework. The afterschool program included teaching ten age-appropriate classes for K - 5th-grade students covering topics such as using MyPlate food groups, making healthy choices, and reading nutritional labels. The program's success was evaluated using

pre-quiz and post-quiz results and in-class participation.

RESULTS

Approximately 38 students participated in the program. In the curriculum evaluation, 70% of the students reported enjoying the healthy eating classes, and 80% reported wanting to continue with more nutrition projects. The post-curriculum surveys showed that, on average, students had a 35% increase in their understanding of healthy eating behaviors and the ability to recognize healthy food groups.

IMPLICATIONS FOR PRACTICE

The project findings demonstrated a significant increase in elementary students' learning of healthy eating concepts. These types of programs have the potential to lead to healthy eating self-efficacy, promote lifelong healthy behaviors, and ultimately prevent long-term health problems.

Implementation of an Elementary School-Based Nutrition and Healthy Eating Curriculum

PURPOSE

Proper nutrition is a key component that can significantly improve children's overall health. Many elementary schools do not include adequate nutrition education in their curricula. This Doctor of Nursing Practice (DNP) project implemented a nutritional curriculum for fifth graders to develop foundational knowledge and gain experience in choosing essential nutrition options to promote healthy eating behaviors and improve well-being.

METHODOLOGY

Fourteen nutrition lessons focusing on nutrition core standards from the Utah Education curriculum were delivered to 93 5th-grade elementary school students. Lessons taught the importance of consuming fruits and vegetables, avoiding sugar-sweetened beverages, avoiding nutrient-poor energy-dense foods, and applying practical, healthy eating strategies. Project assessment included student attendance and participation in each lesson, pre-and post-test questionnaires, weekly interactive quizzes, and comments gathered from students and

educators.

RESULTS

Lessons had a 94% attendance rate, with an average post-lesson completion rate of 97%. Pre- and post-assessment quiz mean scores improved by 27%. 89% of students liked the nutrition lessons, and 91% answered they would improve their food choices because of the lessons. Students' comments on what they learned included statements about choosing healthier food options, MyPlate, and Utah agriculture.

IMPLICATIONS FOR PRACTICE

A nutritional curriculum specific to elementaryaged school children leads to increased knowledge and gained experience in choosing essential nutrition to promote well-being and the prevention of diseases. A DNP-family nurse practitioner is crucial in promoting health and wellness and can serve as a resource for nutrition education that may improve community health outcomes.



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Improving Advance Care Planning for the Bone Marrow Transplant Patient and Family

PURPOSE

Advance care planning (APC) is a dynamic process that supports the values and preferences of patients as it relates to future healthcare decisions. Patients diagnosed with leukemia will face many critical treatment decisions during their care. Early ACP conversations and accurate documentation are important in patient outcomes and overall quality of life. The purpose of this Doctor of Nursing Practice (DNP) project was to implement a standardized ACP protocol with a focus on clinician communication and education for a Bone Marrow Transplant/Acute Leukemia Program in Salt Lake City, Utah.

METHODOLOGY

Implementation included clinician education on initiating ACP conversations within a standardized process and using documentation tools to communicate patient decisions within the electronic health record. Data were evaluated from pre-and post-education clinician surveys, patient record reviews of ACP

documentation, patient satisfaction surveys, and clinician surveys.

RESULTS

Eighty-three providers and 33 patients participated in the program. Results showed patients were 64% more likely to fill out ACP documents and 89% more likely to identify a healthcare agent in their patient record. 100% of patients felt like ACP was beneficial, and 94% felt better prepared to make future decisions about their healthcare.

IMPLICATIONS FOR PRACTICE

Implementing a standardized ACP process for at-risk patients increases documentation and the identification of appointed health care agents in the electronic health record. ACP clinician education can increase providers' confidence in initiating critical conversations required for ACP. Patients and clinicians find ACP beneficial and feel it prepares patients to make future health care decisions.

Improving Depression Screening Among Women in the Primary Care Gynecological Setting

PURPOSE

One in five American women in 2017 reported depression. In Utah, the depression rate among women is 23%. Depression decreases quality of life, is a social disadvantage, reduces economic productivity, and leads to poor physical health. Unfortunately, healthcare providers often fail to screen for depression. The World Health Organization suggests that failing to screen for depression in women is unacceptable. Several organizations, including the American College of Obstetricians and Gynecologists, recommend annual depression screenings. The purpose of this Doctor of Nursing Practice (DNP) project was to improve the identification of depression at the Circle of Life Women's Center (COLWC).

METHODOLOGY

This quality improvement project introduced the Patient Health Questionnaire (PHQ-9) depression screening tool for annual exams at COLWC. Education materials, mental health referrals, and treatment were offered to patients who screened positive. Pre- and post-project screening rates were analyzed, and verbal

feedback was obtained from participating clinicians.

RESULTS

All of the clinic's 12 providers participated in the project. COLWC's six-month depression screening rates improved from 2.3% to 23.8%. 42% of women who were screened scored positive, and 23% received treatment. Clinicians reported that time and workflow interruption were barriers to screening.

IMPLICATIONS FOR PRACTICE

This project demonstrated that using a screening tool can improve depression identification in the gynecology setting with minimal intrusion. The findings contribute to better mental health for women in the area. The screenings could be used in other primary care clinics. With leadership, organizational support, and barrier mitigation, depression rates for women could be decreased in the community.



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