



WEBER STATE UNIVERSITY  
Dumke College of Health Professions

# ANNIE TAYLOR DEE — SCHOOL OF — NURSING



## DOCTOR OF NURSING PRACTICE

### *Graduate Projects*

FALL 2024

# 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

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# 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

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



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

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

**Carrie Jeffrey**

PhD, RN

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



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# Faculty Remarks

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

**Amber Fowler**

DNP, RN  
Instructor

Your graduation from the Doctor of Nursing Practice Program is an essential personal and professional milestone and deserves my sincerest congratulations. It has been a pleasure to support your learning and professional growth as advanced nurse leaders who are prepared with the knowledge and skills to translate evidence into practice to improve healthcare outcomes and advance nursing practice in various healthcare settings. I look forward with great anticipation as you continue the Annie Taylor Dee School of Nursing's legacy of nursing excellence in your future pursuits.

**Melissa NeVille**

DNP, APRN, CPNP-PC, CNE  
Professor

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  
Assistant Professor

# Doctor of Nursing Practice Faculty and Staff

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**Stephanie Wheatley**  
MSN, APRN, FNP-C  
Instructor

# 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!

**Amazing Care Home Health Services**

**CommonSpirit Health - Obstetrics & Gynecology Layton**

**Davis Technical College**

**Heritage Park Healthcare and Rehabilitative Services**

**Intermountain Health - Layton Hospital**

**Intermountain Health - Logan Regional Hospital**

**Intermountain Health - McKay-Dee Hospital**

**Intermountain Health Medical Group**

**Intermountain Health - Park City Hospital**

**Intermountain Health - Park City Hospital Emergency Department**

**Intermountain Health - Primary Children's Hospital Miller Campus**

**Intermountain Health - Intermountain Medical Center**

**Intermountain Medical Center - Emergency Department**

**MountainStar Healthcare - Brigham City Community Hospital**

**MountainStar Healthcare - Lakeview Hospital Emergency Department**

**MountainStar Healthcare - Lone Peak Hospital**

**MountainStar Healthcare - Ogden Regional Medical Center**

**Premise Health**

**Southwest Utah Public Health Department**

**University of Utah**

**Utah Valley University**





# 2024

**DOCTOR OF NURSING PRACTICE**

*Graduate Projects*



# Improving the Ability to Recognize a Deteriorating Patient



**LISA  
BAGLEY**

**DNP, RN**

**FAMILY NURSE  
PRACTITIONER**

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

## **PURPOSE**

This quality improvement project was specifically designed to implement an interactive learning module in the outpatient clinics of a large hospital organization. The aim was to enhance nurses' and medical assistants' ability to recognize deteriorating patients.

## **METHODOLOGY**

A needs gap analysis identified a deficiency in recognizing deteriorating patients in outpatient clinics in a large hospital organization. A learning module was created for nurses and medical assistants. Pre- and post-surveys were given to the staff with the learning module, and data was reviewed.

## **RESULTS**

The survey results of nurses and medical assistants (30) indicated a gap in their knowledge and comfort with recognizing a deteriorating patient in outpatient clinics, which decreases patient outcomes. After the learning module was taken, nurses and medical assistants increased their knowledge and comfort with recognizing rapidly deteriorating patients.

## **IMPLICATIONS FOR PRACTICE**

The incorporation of evidence-based clinical practice education in outpatient clinics has been shown to significantly reduce deteriorating patient transfer times to the emergency rooms, thereby improving patient outcomes and instilling confidence in the effectiveness of the learning module.

## **PROJECT CONSULTANT**

Sallie Calder, MSN, RN

## **FACULTY LEADS**

Cynthia Beynon PhD, RN, CNE

Amber Fowler DNP, RN

# Implementation of a Wound Care Practice Guideline

## PURPOSE

This quality improvement project aimed to standardize wound care techniques by creating a resource for continued education on wound care management and establishing a wound care treatment process.

## METHODOLOGY

An educational PowerPoint for best practice wound care methods was distributed to the staff of an emergency department. The process included a dressing decision flowchart to aid in the first-line type of dressing selection, a dressing instruction guide to teach patients how to change their dressings, and a resource of wound care clinic locations for follow-up care referrals. Staff participated in a Qualtrics survey before and after the presentation to assess confidence in wound care knowledge. In addition, two months after implementation, a follow-up survey assessed the staff's opinion of the success of the change.

## RESULTS

Survey results ( $N = 15$ ) indicated that the confidence level on wound care assessments increased from an average of 69% before any wound care education to approximately 96% after the education PowerPoint presentation. In addition, about 85% of the staff strongly/somewhat agreed the department and patients benefited from the new wound treatment process.

## IMPLICATIONS FOR PRACTICE

Providing a standardized wound treatment process in evidence-based wound care techniques reduces nursing practice variability. The education and change in the process increased the nurses' knowledge and confidence levels in how to treat patients' wounds and led to a better overall process.

## PROJECT CONSULTANT

Scott Robins, DO

## FACULTY LEAD

Tamara Berghout, EdD, RN



**KAJSA DEIGH  
COLLINS**

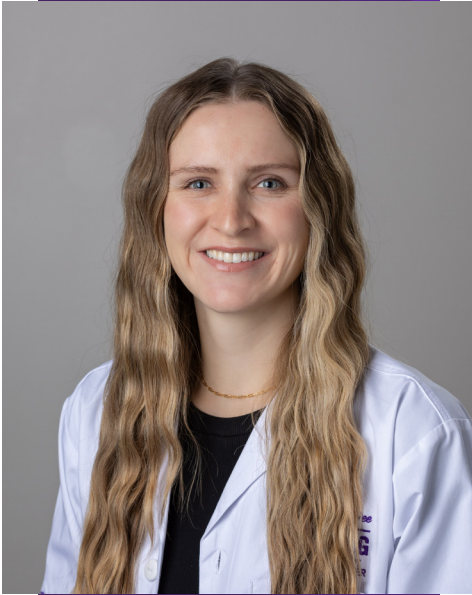
**DNP, RN**

**FAMILY NURSE  
PRACTITIONER**

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# Implementation of a Nurse-Activated Stroke Protocol



**LEXI  
DODSON**

**DNP, RN**

**FAMILY NURSE  
PRACTITIONER**

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

## PURPOSE

This DNP project aims to empower nursing confidence and knowledge through education to implement a nurse-activated stroke process to improve stroke treatment times and care.

## METHODOLOGY

Implementation occurred in three phases: multidisciplinary team planning, education, and a nurse-driven process change. Initially, a multidisciplinary team evaluated stroke processes and barriers to timely care. An evidence-based plan was initiated to improve stroke care quality. Then, nurses completed a simulation and interactive lecture to prepare for process changes. Nurses were asked to complete surveys to evaluate their education. Finally, the nurse-activated stroke process was implemented. Department data was tracked for approximately three months to evaluate the effectiveness of the intervention. A follow-up survey measured nurse satisfaction with the process and confidence in recognizing strokes and leading stroke processes.

## RESULTS

Participants generally reported that the lecture and simulation increased their knowledge and confidence in stroke care in an emergency department (ED) setting. Compared to baseline and goal times, the stroke data showed improvements in stroke recognition, diagnostic, and treatment times. The final survey indicated increased nursing confidence and support for the new process.

## IMPLICATIONS FOR PRACTICE

This project supports a multidisciplinary approach, including caregiver education and a nurse-driven process as effective interventions. Education for nurses can increase their confidence and knowledge of stroke recognition, while nurse-led stroke processes can improve intervention times and patient outcomes.

## PROJECT CONSULTANTS

Irma Hinkle, MSN, RN

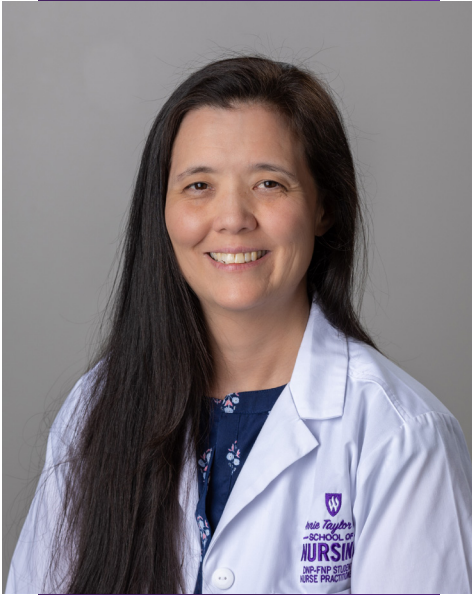
Laura Nelson, MSN, RN

Brady Sanderson, MSN, RN

## FACULTY LEAD

Tamara Berghout, EdD, RN

# Implementation of an Anti-Bullying Workflow Policy and Process at a Regional Technical College



**MARSHA H.  
DULEY**

**DNP, RN**

**FAMILY NURSE  
PRACTITIONER**

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## **PURPOSE**

This Doctor of Nursing quality improvement project aimed to establish an antibullying curriculum to meet the goals of creating a more respectful, inclusive nursing culture set by the nursing program, its institution, Utah System of Higher Education (USHE), and Accreditation Commission for Education in Nursing (ACEN). Additionally, the project satisfies The Joint Commission's (TJC) and the American Nurse's Association's (ANA) call for creating a respectful environment where healthcare workers provide safer patient care.

## **METHODOLOGY**

An evidence-based antibullying curriculum was established for nursing students that included civility training through a flipped classroom style, an online Canvas course, an in-class PowerPoint presentation, roleplaying scenarios that simulated a bullying encounter and debriefing session. For the balancing measures, a pre-project questionnaire evaluated current knowledge of bullying in nursing and its effects on nurse satisfaction and safe patient care. The pre- and post-surveys used a 5-point Likert scale and an area for comments. Descriptive data was collected to analyze the findings.

## **RESULTS**

Post-survey results indicated that most nursing students supported having an anti-bullying curriculum. The simulation questionnaire suggested that the student's knowledge of nurse bullying and advocacy skills improved after participating in the online Canvas course and in-class simulation and debriefing session. Qualitative comments showed that students felt they gained knowledge of bullying and how to advocate for themselves and others and increased their confidence in themselves if they ever encountered a bullying incident.

## **IMPLICATIONS FOR PRACTICE**

Nursing programs must meet national, state, and program goals of creating a more respectful and inclusive nursing culture that benefits future nurses and their patients. The educational module can be adapted and updated to fit current needs. Project findings support the continued use of the education module in the nursing program.

## **PROJECT CONSULTANT**

Jodie Butters, MSN, RN

## **FACULTY LEAD**

Melissa NeVille DNP, APRN, CPNP-PC, CNE

# Implementing Evidence-Based Nonpharmacological Interventions for Prevention of Postoperative Nausea and Vomiting at a Regional Community Hospital



**CHRISTINE  
ELDREDGE-  
BROWN**

**DNP, RN**

**FAMILY NURSE  
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## PURPOSE

Postoperative nausea and vomiting (PONV) is a common occurrence affecting surgical patients following anesthesia. In addition to patient dissatisfaction, PONV can cause various patient issues, including dehydration, electrolyte imbalance, aspiration of gastric secretions, wound dehiscence, delayed discharge, and increased risk of rehospitalization. This Doctor of Nursing Practice quality improvement project involved implementing an integrative care process offering preoperative patient acupressure as an adjuvant to traditional treatments for patients at a regional same-day surgical unit.

## METHODOLOGY

To address postoperative nausea and vomiting—which occurs despite advances in anesthesia and antiemetic medications—a literature review was performed, and evidence-based interventions were identified to prevent or mitigate PONV. A new care process was created, including using a PONV risk score, a multimodal approach for treating PONV, and the departmental introduction of an acupressure device. This new care process was piloted within the same-day surgery department of a regional community hospital. The new process was initiated through the staff nurses improving the identification of patients at high risk for PONV, empowering the nurses to implement measures to prevent PONV, and providing guidelines for treating patients who experienced nausea postoperatively.

## RESULTS

Pre- and post-education surveys were conducted of the nursing staff within the same-day surgery department, along with follow-up surveys on the new care process and device use. The data collected from surveying 24 nurses revealed an improvement in the nurses' understanding of PONV risk assessment and interventions for preventing and mitigating PONV. The survey data indicated that the nurses improved their confidence in PONV care, understood scoring PONV risk, the enthusiastic patient feedback about trying the acupressure devices, and the patient satisfaction with their postoperative care. The data also revealed that the nurses believed they had an essential role in preventing and treating PONV.

## IMPLICATIONS FOR PRACTICE

Introducing a new care process and interventions for preventing and mitigating PONV improves patient outcomes, patient satisfaction, and nurse and anesthesia provider satisfaction. The evidence gathered demonstrates that acupressure is a safe and effective therapy for preventing and mitigating PONV and is recommended by consensus guidelines as part of a multimodal approach. With the addition of acupressure devices, this new care process is currently being considered throughout the regional hospital's organization. Utilizing integrative medicine within the hospital setting is an area for valuable future research.

## PROJECT CONSULTANT

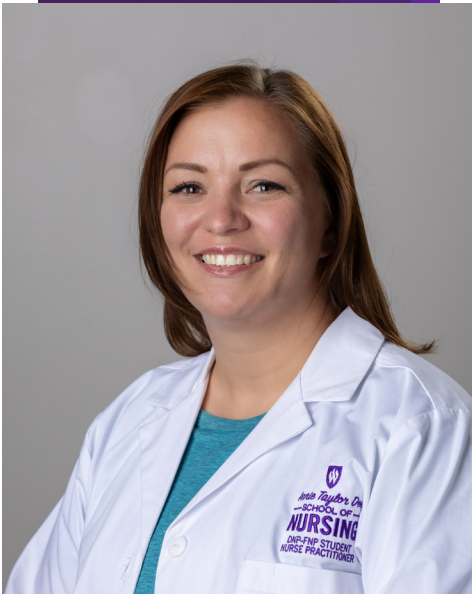
Gary Stroud, MSN, RN

## FACULTY LEAD

Melissa NeVille DNP, APRN, CPNP-PC, CNE



# Implementation of an Evidence-Based Pediatric Diabetes Care Program in a Regional Hospital: Enhancing Coordination of Care



**SAMANTHA  
FUGAL HEALEY**

**DNP, RN**

**FAMILY NURSE  
PRACTITIONER**

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

## PURPOSE

Nurses caring for pediatric patients must recognize and respond to acute changes in managing type 1 diabetes mellitus (DM1) and diabetic ketoacidosis (DKA). Prolonged, uncorrected DKA has been linked to adverse outcomes and increased morbidity and mortality. This Doctor of Nursing Practice quality improvement project was designed to enhance nurses' knowledge and skills in caring for pediatric patients with DM1 and DKA within a regional hospital's medical/surgical unit to prevent undesirable outcomes and reduce morbidity and mortality rates.

## METHODOLOGY

This quality improvement project followed the Iowa Model Revised framework. A care coordination program was established for the medical/surgical unit nurses, which included workflow process training, education, self-appraisal tools, and an in-situ simulation. Participants were asked to complete surveys before and after the education program and before and after the simulation training.

## RESULTS

Pre-education survey results indicated an educational gap in awareness and ability to treat pediatric DKA and DM1 patients. However, after the education program and simulation training, follow-up surveys revealed improved understanding and ability to treat pediatric DKA and DM1 patients. This improvement highlighted the positive impact and value of the project on the nurses' skills in providing quality patient care.

## IMPLICATIONS FOR PRACTICE

Standardizing education for nurses treating pediatric DKA and DM1 patients improves nurse knowledge and ability to manage acute pediatric diabetic conditions safely.

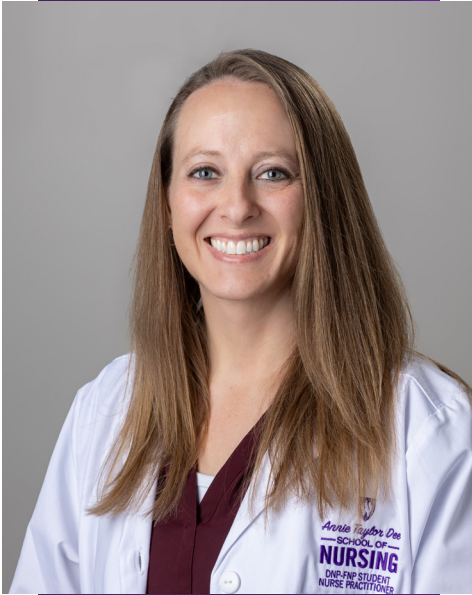
## PROJECT CONSULTANT

Lindsay Curtis, MBA, MSN, RN

## FACULTY LEAD

Melissa NeVill DNP, APRN, CPNP-PC, CNE

# Emergency Department Triage Education



**RACHEL  
GATHRO**

**DNP, RN**

**FAMILY NURSE  
PRACTITIONER**

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

## PURPOSE

This quality improvement project aimed to standardize the triage system for a level-one trauma center emergency department using the Emergency Severity Index (ESI).

## METHODOLOGY

The project was a practice intervention to improve emergency department triaging utilizing the standardized ESI system algorithm. Pre-assessments were sent to the nurses to evaluate their confidence and knowledge of ESI. An online module was distributed in the emergency department's quarterly education. Post-assessments were used to determine the module's effectiveness. Follow-up post-assessments were sent to the nurses four months later to determine the long-term retention of the knowledge.

## RESULTS

Survey results showed that post-intervention, nurses were more comfortable assigning triage levels and felt they understood what to consider as resources when triaging patients. The post-intervention knowledge assessment substantiated the increased confidence. Nurses also demonstrated an increased understanding of when to consider vital signs in the algorithm, except for blood pressure. Overall, four knowledge questions showed improvement, accuracy on two declined, and three remained the same.

## IMPLICATIONS FOR PRACTICE

Standardizing triage in the emergency department decreases wait times and improves patient safety. Continuing education on ESI enhances and maintains understanding and confidence in applying the triage system in the emergency department setting.

## PROJECT CONSULTANT

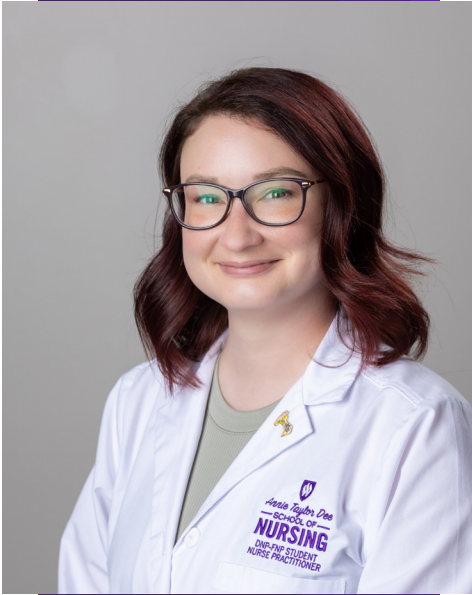
Karlene Hibbard, MSN, RN

## FACULTY LEADS

Cynthia Beynon PhD, RN, CNE

Amber Fowler DNP, RN

# Implementation of SCANS/Time-Out Project at a Large Healthcare Facility



**SHELBI  
GREEN**

**DNP, RN**

**FAMILY NURSE  
PRACTITIONER**

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

## PURPOSE

The SCANS/Time-out project aims to improve staff communication and adherence to the surgical checklist.

## METHODOLOGY

The project's design involved standardizing the checklist across all operating rooms. Addressing critical safety measures such as patient identification, consent verification, and fire risk assessment. Implementation strategies included phased rollout, staff education sessions, and monthly audits to assess compliance and identify areas for improvement.

## RESULTS

Pre- and post-surveys were administered to operating room staff to gauge their awareness and compliance with the SCANS/Time-Out project. Data collection utilized Qualtrics survey software for confidentiality.

## IMPLICATIONS FOR PRACTICE

Successful implementation of the SCANS/Time-Out project resulted in improved communication among surgical teams, enhanced adherence to safety protocols, and is expected to reduce incidences of sentinel events.

## PROJECT CONSULTANT

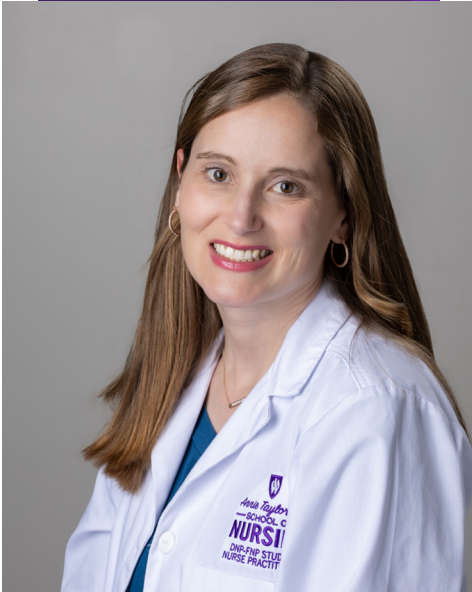
Lana Leishman, MS, RN

## FACULTY LEADS

Cynthia Beynon PhD, RN, CNE

Amber Fowler DNP, RN

# Proactive Support for the Mental and Physical Health of Pilots in Training



**MARIE HART  
CLAYTON**

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**FAMILY NURSE  
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— SCHOOL OF —  
**NURSING**

## PURPOSE

This project aimed to create educational modules for pilots in training highlighting Lifestyle Medicine for health promotion, to identify resources, and to reduce medical hesitancy.

## METHODOLOGY

Educational videos were created, and feedback was gained to optimize the materials for future use in an aviation program. All the faculty, Certified Flight Instructors, and pilots in training ( $N = 204$ ) were invited to view the educational materials and give feedback after completion.

## RESULTS

Of the 204 individuals invited to participate, 36 consented to view the videos, and three (1.4%) completed the feedback survey. All three survey results revealed that 100% agreed the content was applicable and easy to understand, and they were confident it would help them in their aviation career. Qualitative feedback showed some negative feedback about the length and number of videos for the content covered.

## IMPLICATIONS FOR PRACTICE

A more engaging approach must be employed to communicate this content to this population. It is recommended that this training be mandatory for this population to learn these concepts and continue to gather feedback to optimize these materials. Due to minimal participation, it is not possible to determine the target population's interest in this topic or the success of the modules and videos.

## PROJECT CONSULTANT

Fiona Silcox, MAS

## FACULTY LEADS

Kelley Trump, DNP, RN, CNE, COI

Chelsea Pike, DNP, RN, CNE



# Thromboembolism Prevention and Management Education Program for a Rehabilitation Center



**JANELLE LYNN  
HARVEY**

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PRACTITIONER**

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

## **PURPOSE**

This project aims to implement a practice change that enhances the care for patients with thrombolytic conditions while increasing the nurse's understanding and confidence in managing these complex patients.

## **METHODOLOGY**

An educational presentation was created and presented to a long-term care and rehabilitation facility in Northern Utah. Pre- and post-surveys were distributed to the nurses using a QR code. The survey measured the nurses' confidence in recognizing thrombosis risk factors, preventative measures, signs and symptoms, safety precautions to use with anticoagulants, and confidence in caring for patients with a blood clot or anticoagulant medication.

## **RESULTS**

Data was analyzed, and gaps in knowledge regarding confidence in blood clots and anticoagulants were identified. Data suggests that the educational presentation increased confidence for nurses in identifying risk factors, signs and symptoms, and care for patients with these conditions.

## **IMPLICATIONS FOR PRACTICE**

Educating nurses on identifying blood clots and anticoagulation risk factors can help improve patient outcomes. If a nurse is confident in understanding risk factors, recognizing signs and symptoms of complications, and providing appropriate care for these patients, client care and outcomes can be significantly improved.

## **PROJECT CONSULTANT**

Rachel Fletcher, MSN, RN

## **FACULTY LEADS**

Cynthia Beynon PhD, RN, CNE

Amber Fowler DNP, RN

# Registered Nurse Apprenticeship Pathway



**REBECCA LYNN  
HAWKINS  
BOND**

**DNP, RN**

**FAMILY NURSE  
PRACTITIONER**

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— SCHOOL OF —  
**NURSING**

## PURPOSE

The objective of this research was to examine the changes caused by the implementation of the Registered Nurse Apprentice (RNA) pathway in educational and clinical settings when the RNA failed the NCLEX. By identifying gaps and challenges, we aim to propose policy changes.

## METHODOLOGY

In the Fall of 2023, a Qualtrics survey was distributed to leaders of educational and healthcare organizations across Utah. Qualitative analysis with thematic analysis coding and inductive coding for theme identification were used.

## RESULTS

Responses from 27 healthcare organizations and 23 faculty were received. Themes identified include a lack of communication and common goals between the educational and healthcare organizations and inconsistency in the use of the RNA.

## IMPLICATIONS FOR PRACTICE

Communication and goals between educational and clinical sites could be better aligned. A possible solution includes a central coordinator at the state level, with the licensing division and/or educational and clinical coordinators forming a board to coordinate RNA policy.

## PROJECT CONSULTANT

Teresa A. Garrett, DNP, RN, PHNA-BC

## FACULTY LEADS

Cynthia Beynon PhD, RN, CNE

Amber Fowler DNP, RN

# Infant Safe Sleep Practices in the Newborn Intensive Care Unit



**BRYNN  
JORGENSEN**

**DNP, RN**

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## PURPOSE

This quality improvement project aimed to increase nursing staff adherence to safe sleep practices in the NICU.

## METHODOLOGY

This ten-week project included pre-intervention crib audits and surveys to assess nursing staff's baseline knowledge, attitudes, and behaviors regarding safe sleep practices. An educational intervention, consisting of a skills day presentation and a systems intervention approach using visual crib card placement in each NICU bed space, was then conducted. Postintervention crib audits and staff surveys measured the impact of the quality improvement intervention.

## RESULTS

Pre-survey data revealed a knowledge and practice gap regarding safe sleep positioning among NICU nurses. Post-survey data revealed that the knowledge gap had decreased. Postintervention crib audits showed improved compliance with safe sleep protocols among nursing staff.

## IMPLICATIONS FOR PRACTICE

The findings suggest that a quality improvement and systems intervention approach can significantly improve nursing staff compliance with safe sleep protocols in the NICU. This improvement has the potential to reduce the risk of sudden unexplained infant deaths.

## PROJECT CONSULTANT

Angela Bennett, MSN, RN

## FACULTY LEAD

Angela Page, DNP, APRN, PPCNP-BC

# Emotional Support in Nurse Debriefings

## PURPOSE

This quality improvement project aimed to educate emergency department nurses on effective ways to use mindfulness tools and debriefing methods to mitigate burnout and compassion fatigue.

## METHODOLOGY

Emergency department nurses were educated on effective mindfulness tools and debriefing methods. A pre- and post-implementation design was used to determine whether mindfulness tools and debriefing methods changed nurses' professional quality of life survey scores.

## RESULTS

Twelve nurses participated in the pre-implementation survey, and eleven nurses participated in the post-survey. The post-survey results showed an increase in emotional debriefings after traumatic events post-project implementation. Surveys also show that more nurses took time to care for themselves after the project implementation.

## IMPLICATIONS FOR PRACTICE

Strengthened debriefings, using current evidence under the guidance of a trauma therapist, prevent nurse burnout and promote resiliency.

## PROJECT CONSULTANT

Bernice Tenout, BSN, RN, LCSW

## FACULTY LEAD

Cynthia Beynon PhD, RN, CNE

Amber Fowler DNP, RN



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# Addressing Parental Vaccine Hesitancy at a County Health Department



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## PURPOSE

This quality improvement project aimed to address vaccine hesitancy by improving the confidence and competence of staff at a Southwest Utah health department immunization clinic by educating staff on evidence-based communication techniques that reduce vaccine hesitancy and increase vaccine uptake.

## METHODOLOGY

A self-paced online training module was created to provide interactive activities and video examples to teach staff best practices for addressing vaccine hesitancy. The training module was followed by an in-person training session to review the content of the training module and allow participants to practice the learned skills through simulation activities.

## RESULTS

Staff survey results ( $N = 15$ ) indicated improvements in critical areas such as awareness of parental vaccine hesitancy as a problem, comfort in counseling vaccine-hesitant parents, confidence in identifying vaccine-hesitant parents, utilization of motivational interviewing techniques, and competence in making vaccine recommendations. However, mixed results were observed in the use of presumptive language, indicating that some aspects of the training may need reinforcement.

## IMPLICATIONS FOR PRACTICE

This quality improvement project highlights that comprehensive training on evidence-based practices for addressing vaccine hesitancy can effectively enhance staff skills and confidence, contributing to the overall goal of improving vaccine uptake.

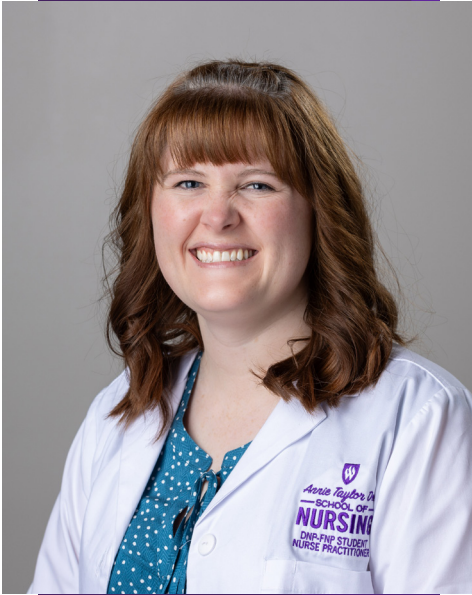
## PROJECT CONSULTANT

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# Raising Palliative Care Awareness in a Salt Lake City Hospital Neuro Critical Care Unit



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## PURPOSE

This quality improvement project explores the impact of targeted palliative care education on Neuro Critical Care Unit (NCCU) nurses' knowledge and confidence in discussing and recommending palliative care.

## METHODOLOGY

The project involved implementing an educational module, introducing palliative care infographics in cubbies between patient rooms, and integrating regular palliative care discussion topics during shift huddles. Pre- and post-education surveys and infographic tally marks were utilized to evaluate the intervention's effectiveness.

## RESULTS

Pre- and post-survey results indicated a significant improvement in nurses' knowledge of and comfort levels in discussing palliative care with patients, families, and providers. However, infographic tally marks revealed no observable increase in palliative care referrals.

## IMPLICATIONS FOR PRACTICE

The survey results support the importance of continuous education and suggest that while knowledge and confidence can be improved, translating these into increased referral rates may require more sustained and systemic changes. It also highlights the challenges in changing referral behaviors and the need for ongoing efforts to integrate palliative care into routine NCCU practices.

## PROJECT CONSULTANT

Melissa Wilkinson, MSN, APRN, AGACNP-BC

## FACULTY LEAD

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# Improving Safe Sleep Practices in a Newborn Intensive Care Unit (NICU)



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## **PURPOSE**

This quality improvement project aimed to enhance safe sleep practices in the NICU through an evidence-based approach.

## **METHODOLOGY**

Implementing a safe sleep bundle protocol aimed to improve continuity of care, role modeling of safe sleep practices, and enhanced caregiver education. The safe sleep bundle protocol implemented in this project included utilizing an algorithm to transition infants to safe sleep positioning as soon as medically stable, ensuring every infant in the NICU has a safe sleep order or medical exempt positioning order, using swaddle sacks and swaddle blankets, and implementing a collaborative approach to discussing infant sleep orders during interdisciplinary rounds.

## **RESULTS**

Survey results of nurses indicated ( $N = 13$ ) an improvement in education about the components of a safe sleep bundle and the importance of implementing the safe sleep bundle protocol. Due to the evidence, a level IIB NICU adopted the safe sleep bundle protocol.

## **IMPLICATIONS FOR PRACTICE**

When a safe sleep bundle protocol is utilized, NICU infants more consistently transition to safe sleep positioning as soon as they are medically stable. Role modeling of safe sleep positioning and family education is vital in promoting adherence to recommended safe sleep guidelines after discharge and empowering parents to actively participate in their infant's safety.

## **PROJECT CONSULTANT**

Anglea Ashcroft, DNP, NNP

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# Use of a Ventilator Care Bundle (VCB) to Reduce Ventilator-Associated Pneumonia (VAP)



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## PURPOSE

This quality improvement project aimed to develop and establish a VCB in a regional hospital lacking these interventions to prevent VAP in intubated and ventilated patients.

## METHODOLOGY

A VCB was created using evidence-based practice guidelines to mitigate and prevent VAP. The project also included creating a policy for project sustainability and an educational program to prepare staff for implementation. Pre- and post-surveys measured the intensive care unit (ICU) staff's knowledge of VAP risks and how a VCB can mitigate many of those risks. The post-education survey demonstrated the effectiveness of the education portion of the project.

## RESULTS

The unit adopted the new policy and 28 of 34 staff participated in the educational intervention. Pre-intervention survey results ( $N = 20$ ) indicated a gap in the knowledge of VCB interventions that could abate many of the VAP risks. Following the educational instruction, the post-education survey results ( $N = 14$ ) demonstrated improved understanding of VCB interventions and how to prevent VAP in ventilated patients.

## IMPLICATIONS FOR PRACTICE

Implementing a VCB and educating ICU staff about its use and VAP enhances their knowledge about the condition and preventative interventions. Developing a policy for VCB with staff education establishes a program for new and existing ICU staff.

## PROJECT CONSULTANT

Megan Moon, MSN, RN

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## Effective Interventions for Hypertension Management

### PURPOSE

This DNP project aims to implement a new blood pressure workflow for healthcare team members and improve blood pressure outcomes for patients at a family practice clinic.

### METHODOLOGY

Healthcare team members who work at a family practice clinic in Salt Lake County, Utah, were given a pre-survey to assess the likelihood of using specific blood pressure interventions in patients with high blood pressure. After the implementation of the workflow, healthcare team members were asked to complete a post-survey to assess the likelihood of using steps in the new workflow.

### RESULTS

Four nurses completed the pre and post-survey for the blood pressure workflow intervention. After the workflow's implementation, the participants reported an increase in communicating blood pressure results to the patient and a provider. Additionally, there was a higher likelihood of rechecking the patient's blood pressure and recommending a follow-up appointment if the blood pressure was greater than 140/90.

### IMPLICATIONS FOR PRACTICE

Implementing a standardized blood pressure workflow improves the communication of blood pressure results to providers and patients. Additionally, patients with elevated blood pressure are likely to be referred for follow-up visits. Using a standardized blood pressure protocol improves blood pressure outcomes.

### PROJECT CONSULTANT

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### FACULTY LEAD

Cynthia Beynon PhD, RN, CNE

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# Critical Incident Stress Debriefing (CISD) Program Implementation in a Community Hospital Emergency Department (ED)



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## PURPOSE

This quality improvement project aimed to implement and standardize a community ED's debriefing process after critical events.

## METHODOLOGY

A structured debriefing process, including clinical debriefing (CD) and CISD sessions, was implemented in the ED to support nurses after critical events. Pre- and post-intervention surveys, designed with Likert scales, were used to assess ED nurses' knowledge of CISD and their perception of organizational support, supplemented by a follow-up questionnaire to gather qualitative feedback on barriers and process improvements.

## RESULTS

The community ED's adoption of a standardized debriefing process significantly increased nurses' feelings of organizational support post-intervention ( $N = 12$ ). The CISD program effectively enhanced support, reduced secondary traumatic stress (STS), and improved overall nurse well-being by addressing existing support gaps for ED nurses.

## IMPLICATIONS FOR PRACTICE

The implementation of structured CISD programs can have significant positive effects on emergency nurses' mental health, leading to better patient care and a more supportive work environment.

## PROJECT CONSULTANT

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# Communication and Care Coordination to Promote Patient-Centered Care in Pediatric Homecare



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## PURPOSE

In the homecare setting, communication can be challenging. When communication is poor, this can negatively affect patients and their families. This quality improvement project aimed to improve communication between pediatric patient's families and the nursing care team through education and a process change.

## METHODOLOGY

The literature review appraised research on topics related to communication in pediatric home healthcare to inform future quality improvement (QI) in this population. The themes identified from the literature on communication components, barriers, and partnerships informed the education-based quality improvement intervention that was tested at a small pediatric homecare agency. Two groups of nurses participated in this project: a pilot group of case managers and the general nursing staff. The pilot group voluntarily completed an online education module on active listening, motivational interviewing, and SMART goal-setting. The nursing staff received the same education via a mandatory in-service meeting, and they were invited to complete interventions on learned topics and log them in the patient chart.

## RESULTS

The pilot group completed pre- and post-surveys, which indicated an increase in confidence in using the learned skills. The nursing staff group was evaluated through chart checks, and no impact was shown, and poor nurse buy-in was evident.

## IMPLICATIONS FOR PRACTICE

Evidence-based communication techniques are relevant to home care because they improve patient outcomes and satisfaction and facilitate care coordination. Nurse education is crucial to translating this knowledge into practice, but attitudes about change must be effectively addressed.

## PROJECT CONSULTANT

Katherine Reid, BSN, RN  
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## FACULTY LEAD

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# Implementation of a Standardized Provider Order Set for Type 1 Diabetes Management in Postpartum Patients



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## PURPOSE

This quality improvement project aimed to standardize the care of this population by implementing a standardized provider order set at a local community hospital.

## METHODOLOGY

Using evidence-based standards, a standardized provider order set was created, along with a PowerPoint presentation and educational handouts regarding the order set and insulin management during the postpartum period. The order set and educational materials were given to the labor and delivery (L&D) and postpartum nurses and a pilot group of 10 obstetrical (OB) providers. Pre- and post-surveys were conducted to evaluate the results of the intervention.

## RESULTS

The survey results ( $N = 19$ ) revealed an improvement in participant comfort levels with managing different components of type 1 diabetes care of postpartum patients. The post-survey also included two qualitative questions that indicated positive feedback on the educational intervention that was provided ( $N = 10$ ).

## IMPLICATIONS FOR PRACTICE

Implementing and educating nurses and OB providers about an evidence-based standardized provider order set can prepare them for caring for postpartum patients with type 1 diabetes mellitus. Standardization of care with an order set can facilitate care that is safe and patient-centered.

## PROJECT CONSULTANT

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## FACULTY LEAD

Kelley Trump, DNP, RN, CNE, COI

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# Pre-Screening for Early Identification of Sex-Steroid Hormone Imbalances



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## PURPOSE

This quality improvement project aimed to assist medical providers with the early identification of patients experiencing symptoms of polycystic ovary syndrome (PCOS) or primary ovarian insufficiency (POI).

## METHODOLOGY

This six-week quality improvement project included the implementation of an educational presentation, pre-screening tool, and referral process. A pre-intervention survey assessed the medical provider's baseline knowledge of PCOS and POI. Then, an educational presentation was administered, and a post-survey assessed the increase in knowledge. Lastly, the pre-screening tool was implemented, and a long-term follow-up assessed the provider's perception of the tool's usefulness.

## RESULTS

Post-education survey data demonstrated an increase in medical provider's knowledge of PCOS and POI. Long-term follow-up data revealed that providers perceived that the pre-screening tool contributed to improved patient outcomes through the assistance of earlier recognition of patients experiencing signs and symptoms of PCOS and POI.

## IMPLICATIONS FOR PRACTICE

Findings suggest that this quality improvement project is efficacious in assisting medical providers with the prompt identification of patients experiencing signs and symptoms of PCOS and POI.

## PROJECT CONSULTANT

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## FACULTY LEAD

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# Congrats to our 2024 DNP Family Nurse Practitioner Graduates!



*From Everyone At*

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