Message from the Dean

WELCOME TO THE REBIRTH OF LONGHORN NURSING — our premier annual publication. We’re excited to bring you news of what’s been happening on the Forty Acres with our students and faculty and also to share interesting information about the successes of our alums.

As only the third dean in the history of The University of Texas at Austin School of Nursing, I realize the importance of our traditions and foundations. I also know that if we are to keep pace with today’s health-care demands we must embrace new technologies and teaching models, integrate innovative research into the student experience, and immerse ourselves in the ever-changing landscape of the health-care delivery environment.

Since my appointment as dean in December 2010, I have been guided by the four key messages provided in “The Future of Nursing: Leading Change, Advancing Health,” a report published by the Institute of Medicine (IOM) in October 2010. Here at the UT Austin School of Nursing, we are mindful of each of these points as we develop new and innovative educational opportunities and diligently work to keep our research and outreach relevant to the needs of the local and global communities.

1. Nurses should practice to the full extent of their education and training. We support efforts to recognize more appropriate scopes of practice for advanced practice nurses and are engaged in providing information on the preparation of primary and specialty care for APRN students.

2. Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression. We have enhanced our master’s and doctoral programs, expanded the family nurse practitioner and family psychiatric mental health nurse practitioner tracks, and are working on a revision of our RN-BSN program to create a more seamless transition for those seeking a four-year degree while in nursing practice.

3. Nurses should be full partners with physicians and other health-care professionals in redesigning health care in the United States. With a medical school in Austin on the horizon, the School of Nursing is at the forefront of creating inter-professional education and practice opportunities with our academic colleagues. The success of future partnerships between health-care practitioners from a variety of disciplines will depend on their exposure to collaborative practice during the educational experience — something that is unfolding naturally at UT Austin between Nursing, Pharmacy, Social Work, Public Health, and medical residents from UT Southwestern. We are leading the charge by offering a new inter-professional collaboration elective for these groups.

4. Effective workforce planning and policy making require better data collection and information infrastructure. Our faculty and leadership participate with other nursing schools, professional organizations and the State Board of Nursing to make the most of available resources. Several faculty serve on national committees, and I am proud to be the incoming president of the Texas Association of Deans and Directors of Nursing Programs.

In these pages, you will learn more about our innovative research programs, our “on the ground” delivery of health-care services to underserved populations, and national and international recognition of excellence of our students and faculty. I hope that as you read, you’ll be inspired and energized about Longhorn Nursing.

Hook ’em!

Alexa Stuifbergen, PhD, RN, FAAN
Dean, The University of Texas at Austin School of Nursing
Laura Lee Blanton Chair in Nursing
James R. Dougherty, Jr. Centennial Professor in Nursing
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WHEN CORINNE GRIMES, PHD, RN, began teaching nursing students 30 years ago, no one knew what an iPad or iClicker were, much less how to use them. Students were expected to take notes with paper and pen because laptop computers hadn’t been invented, and Twitter was still just a gleam in a young boy’s eye.

“Back then, instructors could only hope that they were getting through and that students were absorbing and learning — not to mention staying awake,” said Grimes, director of the Learning Center at the School of Nursing. “Unfortunately, we wouldn’t find out how well they were doing until exam time, which was often too late.”

Today, professors at The University of Texas at Austin School of Nursing can get real-time feedback thanks to radio frequency response systems, such as the iClicker. These handy electronic gadgets are used for grading and keeping track of attendance and, most importantly, measuring student involvement. That information, according to Grimes, can help instructors to identify marginal students who otherwise might fall through the cracks.

Even before the iClicker arrived on the scene, other classroom performance systems (CPS) used by the School of Nursing verified what she and others had thought was the case: students tend to “zone out” during traditional teacher-led, fixed-content instruction.
methods, such as lectures or PowerPoint presentations. Conversely, when more interactive methods are part of the instruction time, students feel engaged. For example, more than half of the students in a recent survey said they felt more involved in class. In addition, their test scores rose by approximately 8 percentage points compared to a previous group of students taking the same course.

Like it or not, technology in the classroom is here to stay. And many, if not most, teachers, students and administrators are finding that they like it — a lot.

The goal of universities everywhere is to improve both student learning and academic success, and many top-tier universities see technological advances as one way to accomplish this. In a recent blog post, Bill Powers, president of The University of Texas at Austin, expressed satisfaction with the institution’s growing use of technology in the classroom, noting that over the past year attendance in those classes implementing interactive classroom technology rose to 92 percent.

“It appears that students are learning more. As for faculty, they show little nostalgia for their old lecture formats and report being energized by greater interaction with students,” he said. "Indeed, far from making professors less important, the consensus is that these student-centered formats make professors more crucial than when they simply paced the stage.”

For nursing schools, the goal to improve learning and academic success is compounded by a need to prepare students to enter a field in which analysis, prediction and decision-making skills are critical. Not only must they develop innovative nursing programs and curriculum but also ensure that students receive necessary clinical experience. But sometimes obtaining bedside access to hospital patients can be difficult.

Referring to a School of Nursing study on the use of simulated clinical experience, Grimes explained that an increase in nursing programs in the Austin area means that more students are competing for the few existing spaces in acute care settings.

“There is pressure to move students more rapidly through certain specialized areas in acute care institutions, which shortens the student’s time at the bedside within these areas,” she said.

As a result, bedside care in hospitals alone may not be adequate to produce nurses who are able to assess and analyze emerging situations, formulate correct conclusions and rescue severely ill patients. To overcome that barrier, faculty and administrators have begun to look to technology, and in 2008 the School of Nursing built a simulation laboratory to reproduce conditions and symptoms that students might encounter, particularly in high-risk areas. Fitted with high-fidelity mannequins that mimic real-life physical and emotional responses to illness states in a realistic hospital setting, students may now encounter every type of patient that a modern health-care facility has to offer, and then some.
The mannequins can be programmed to simulate thousands of physiological responses so that students are thrust into a variety of crises — from severe allergic reactions to cardiac arrest to seizures — that they must learn to correctly identify and respond to. While the students are busy assessing and caring for their “patients,” School of Nursing clinical faculty members and alumni Shannon Patton, MSN, RN, and Scott Hudson, MSN, RN, sit in a control room behind a one-way mirror programming the mannequins and monitoring the students’ actions.

“It can be a very stressful situation for some students,” said Scott Hudson, assistant director of the Learning Center and Simulation Center. “But then, nursing can be a stressful occupation.” One of the objectives of a simulated clinical experience is to allow students an opportunity to practice performing well regardless of the stressful nature of the clinical environment, he added.

For example, in the birthing center, students encounter Noelle, a mannequin that gives birth, smoothly transitioning between physiologic states, sometimes several times a day. Her baby may be in a breech position or she may require a C-section. Afterwards, both she and her newborn Hal need to have their vitals taken. Hal may develop trouble breathing or be in extremis with excessive crying and convulsions. You just never know. Which is the point, because most of the students have never encountered a woman in labor or held a baby, much less a newborn. The sessions last approximately 45 minutes, and in a debriefing afterwards the students have a chance to talk about what just happened and to justify their actions.

Hudson explained that it’s during these debriefing sessions that the real learning happens.

“It was a great chance for me to practice nursing care in a critical, but safe, situation,” agreed one student. “The communication with the other students during the lab time and with the instructors afterwards was invaluable.”

Simulation in the form of case studies and role-playing arose centuries ago, and simulators developed during World War II proved especially valuable when the need to rapidly train fighter pilots was critical, said Grimes. Today’s human simulators, however, are light years beyond anything produced in the mid-twentieth century. These sim lab mannequins, costing upwards of $60,000 each, are exquisite examples of high-tech engineering that require a similar level of expertise to operate in order to achieve the desired learning outcomes. But Grimes said it’s worth the expense and effort because evidence shows that students who spend time in simulation labs may more easily spot physiologic changes and more rapidly and safely respond on a team or individual level. In other words, the hope is that failure to rescue a patient showing signs of deterioration will become more rare in the clinical setting as a result of practice within the safe environment of the simulation laboratory.

“Our School of Nursing prides itself on rigorous curricula at both the undergraduate and graduate levels with innovative classroom, clinical and community experiences,” said Alexa Stuifbergen, dean of the School of Nursing. “We have thoroughly embraced today’s valuable technological tools to prepare students for a career in nursing and are also keeping our eye on tomorrow’s advances.”

So, what’s in store for nursing education? According to the National League for Nursing, a rapid growth in information technology will continue to make a radical impact on health-care delivery and the education of nurses. Advances in processing capacity and speed, the development of interactive user interfaces, and the increased affordability of personal computers will continue to contribute to the explosion of information technology applications. Faster and more flexible access to data and new means of observation and communication will also have an impact on how nursing research is conducted. Without doubt, nurses of the 21st century will increasingly encounter the use of technology to stimulate critical thinking and skill acquisition.

Sounds like Noelle, Hal and their cohorts have a busy future ahead of them providing students at the School of Nursing with hours and hours of unpredictable scenarios.

A brave new world indeed.
Student Explores the Many Facets of a Career in Nursing

HIS MOTHER WAS A NURSE and his father a teacher, but Eduardo Chavez had other ideas about what he wanted to do with his life. After graduating from Texas A&M with a bachelor’s of science degree in biology/entomology, he pictured himself happily spending the rest of his life in a lab studying ants.

“\text{I was really interested in the social interaction of ants and how they adapt to their environments,}” Chavez said. “\text{Ants have traveled with humans across the globe.}\n
Prior to making that lifetime commitment, however, he joined the Peace Corps and spent the next 27 months in Paraguay teaching beekeeping and running a honey co-op. In his spare time, Chavez was asked to oversee public health-related projects such as workshops on general hygiene and women’s health, and he discovered how much he enjoyed the interaction with the townspeople.

While in Paraguay, Chavez also witnessed the impact an extended drought was making on the population, and especially children. What little drinking water existed had become contaminated and was causing severe bouts of diarrhea. As a result, parents began to restrict the amount of water their children drank, only to have them dehydrate, sicken and die.

“\text{It was a real eye-opener. I began to see what people go through because they lack not only supplies and access to health care, but even basic knowledge about how to prevent illnesses,}” Chavez said.

With this change of perspective, came a change in career plans. Chavez returned to his home state and enrolled in The University of Texas at Austin’s School of Nursing, where he obtained a bachelor’s in nursing and then entered the graduate program. In the meantime, armed with his RN license, Chavez began working with both adults and children. He is currently a nurse in the emergency room at Dell Children’s Medical Center. The variety in different settings appealed to him as he thought about a direction for his career. It also caused him to think about the processes used to deliver care and the factors that influence how well those processes are followed, which gave him an idea for his doctoral dissertation.

The United States is at a major crossroads as health-care systems begin to change, reforms are introduced and the pace in hospitals increases. Chavez is concerned that these changes will place additional expectations and pressure on bedside nurses without providing them the necessary leadership skills required to help them perform their job well. As a doctoral candidate, he is researching and identifying the behaviors of successful bedside nurses — behaviors that when identified, described and taught, will enable other nurses to succeed at this critical level of patient care.

“The traditional way of looking at nursing leadership usually includes nurse administrators and managers,” said Chavez. “But I’m more interested in which behaviors make a difference at the point where care meets the patient.”

Explaining that the literature on this topic is lacking, Chavez’s dissertation mentor, Dr. Linda Yoder, associate professor of nursing and director of the graduate program in nursing administration and healthcare systems management, believes that Chavez’s work could go a long way toward increasing patient safety, quality of care, and efficiency. It will also add to the body of nursing administrative science and ensure that schools of nursing are teaching the behaviors at various levels.

“People think these leadership behaviors are obvious, but they really aren’t,” Yoder said. “Eduardo is plowing an unplowed field.”

For Chavez, the project underscores the variety of jobs and possibilities that a career in nursing affords. He is excited about the hands-on aspect of the profession, but also appreciates the flexibility to pursue research. And so, like his parents, he will be both a nurse and a teacher after all.

“Nursing allows — and almost requires — you to do both. I don’t know if that can be said of many other professions,” he said.

This spring, Chavez was named the School of Nursing Outstanding Graduate Student. He also received the Jonas Center for Nursing Excellence Award, a scholarship program launched in 2008 by Barbara and Donald Jonas to create outstanding faculty, advance scholarship and spark new and innovative practice.

“Receiving the Jonas Nurse Leaders Award was an extraordinary honor and presents many unique opportunities to represent the School of Nursing at a national level as well as advance my academic goals and professional development,” he said.

Ultimately, the award will help Chavez get closer to his goal of becoming a nurse researcher and a professor — a combination that will undoubtedly make an impact on the future of nursing.
The Family Wellness Center provides quality health care for low-income patients and hands-on training to nursing students

EDUCATION. RESEARCH. SERVICE. These comprise the mission of The University of Texas at Austin School of Nursing. And no other component of the School of Nursing so thoroughly fulfills that assignment as the Family Wellness Center (FWC).

Housed in an unassuming building just east of Interstate Highway 35 in central Austin, the center was established in 2007 to meet two key objectives: to offer clinical training for nursing graduate students and to provide health care to uninsured residents in the community.

The center’s team — including three nurses and two nurse practitioners — is devoted to combining interdisciplinary research and teaching with health care in order to provide top-notch care to a medically underserved population.

“For other health-care settings, teaching is secondary at best,” said Lisa Doggett, M.D. and clinic director. “But since the inception of this clinic, the dean’s mandate has been that we are here to teach as well as see patients.”

And see patients, they do.

Over the past several years, the center has seen a steady increase in patient visits — from 1,754 discrete visits in 2008 to 4,398 in 2011. It wasn’t long until the existing space could no longer adequately accommodate the additional patients and the extra staff the center needed to serve them. Thanks to a generous donation in 2011 of more than $90,000 from the St. David’s Foundation, the facility underwent a major renovation.

Now, the 3,230-square-foot center has a modernized reception area with a more functional front desk, two additional exam rooms, a new office space for nurses and other staff, and an eligibility and referral office. Which is good news, because the FWC is on track to receive more than 6,000 visits by the end of 2012.

The need for accessible health care in Texas is staggering. In Central Texas alone, two hundred thousand families, or 21 percent of the population, currently have no health
Being in a teaching environment makes the staff more inclined to look things up and provide evidence-based health care. “I think patients are going to get better care in an academic setting. There are a lot more people involved in their care.”

insurance. For decades the ratio of physicians in Texas has been below the national benchmark, and by the year 2016, Travis County could be short 770 doctors. Nurse ratios also lag behind the rest of the nation, and projections indicate that the shortage could reach 70,000 by 2020.

The FWC plays a crucial role in health-care delivery in Austin, providing its patients with more of an opportunity to be heard than they would at a typical doctor’s office. Appointments are longer to allow for a nursing student and a physician or nurse practitioner to discuss a health plan based on a thorough medical history. Being in a teaching environment also makes the staff more inclined to look things up and provide evidence-based health care.

“I think patients are going to get better care in an academic setting,” said Doggett. “There are a lot more people involved in their care.”

Plans are underway to add to the number of nursing students who pass through the center as well as increase the amount of research conducted there. In the past, School of Nursing faculty have conducted research at the center on diabetes, multiple sclerosis, menopause and health literacy, but with the renovated space, there is room for more, longer-term projects. The center will also open its doors to other University of Texas entities, such as the College of Pharmacy, to pursue research opportunities onsite.

A growing number of pre-nursing and public health nursing students volunteer alongside the dedicated staff, and students of the School of Nursing often rate the training they receive at the FWC as a top experience in their education. The center is also home to an innovative nurse practitioner (NP) residency program — the only one of its kind in the southern United States — that prepares NPs for careers in health care for the underserved.

“This is a great clinic with personality and talent,” said School of Nursing graduate Christa Lynn Drury, BSN (’03), MSN (’11), who did a clinical rotation at the center. “I learned a lot of creative skills to help patients on a budget,” Drury said. “You have to really know your drugs and tests so that you are making every penny count for your patient and your clinic. I also learned how important it is to really listen to your patients.”

The center embraces a model of care that allows staff to spend time getting to know patients and their families. By building a therapeutic relationship, they can make a significant impact in patients’ lives. Patients who come to the facility are sometimes illiterate; many suffer from mental illness; and all of them are low income. Often in crisis, they lack the resources and know-how to solve problems and follow through with a treatment plan. As a result, the staff tries to find their strengths, engage them as a critical part of the care team and set realistic goals.

One patient — an elderly man with schizophrenia, diabetes and heart problems — is benefitting from this approach. The center’s providers helped coordinate care among his multiple specialists and are in regular contact with his home health nurse with nearly weekly phone calls. As a result, his visits to the hospital emergency room have decreased significantly and he has been able to stay in his own home.

Staff member, Terri Bagwell, RN, FNP (’08), noted that as the Family Wellness Center has grown, so has the quality of care. “We provide really good care, and patients appreciate that. We give that personal touch and are attentive to the many different needs we encounter,” she added.

All of which translates to great value in the preparation of future generations of nurses and the provision of excellent health care to a needy community.

Contributing to this article was Samantha Stiles, PR and Marketing Manager, Jack S Blanton Museum of Art.
Faculty Research

TEXAS IS HOME TO A HIGHLY DIVERSE POPULATION composed of 46.7 percent non-Hispanic Whites, 36.9 percent Hispanics, 12 percent non-Hispanic Blacks, 3.6 percent Asians, and 0.8 percent American Indians. Many Texans experience significant health disparities including obesity, cardiovascular disease, diabetes, hypertension, cancer, and higher rates of very low birth weight and preterm births. These health disparities may be influenced in part by a high poverty rate (24 percent of children), one of the highest uninsured populations (27.8 percent) in the nation, and language and cultural differences.

Nurse researchers at The University of Texas at Austin School of Nursing address the needs of underserved populations in the state and beyond by conducting National Institutes of Health (NIH)-funded studies that focus on health behaviors and health promotion across the lifespan.

Diabetes

Type 2 diabetes is a major health problem affecting 15 percent of U.S. Hispanics.

Dr. Sharon Brown, professor of nursing, began her research in south Texas in 1987 to promote healthier outcomes in Starr County, a border community where fully 50 percent of the Hispanic population over the age of 35 either has diabetes or has a first degree relative with diabetes (a risk factor for developing the disease). With more than $6 million in funding from the NIH, National Institute of Diabetes and Digestive and Kidney Diseases, Brown designed and tested a culturally specific intervention with instruction on nutrition, self-monitoring of glucose levels, and exercise, incorporating group support to promote behavioral changes. More than 1,000 people have completed her program, which has resulted in a clinically and statistically significant reduction in blood sugar levels (measured with HbA1c). Brown is currently funded by the National Institute of Nursing Research for a meta-analytic study of biobehavioral determinants of health outcomes in Type 2 diabetes.

Dr. Alexandra Garcia, associate professor, is testing a culturally specific home-based intervention designed to improve diabetes symptom recognition and self-management among Mexican Americans who live in central Texas. The study is funded by the NIH, National Institute of Diabetes and Digestive and Kidney Diseases. This innovative intervention is tailored to address the participants’ self-identified symptoms, which do not always coincide with the classic symptoms identified by health-care providers and are often not in standardized clinical guidelines. Garcia’s intervention has resulted in significant improvements in participants’ cholesterol levels, blood pressure, diabetes knowledge, self-efficacy (or confidence) to manage diabetes, sense of empowerment, readiness to engage in diabetes self-management behaviors, and quality of life.

Asthma

Of the 24 million Americans who have asthma, 9 million are children under 18 years of age. Dr. Eileen Kintner, associate professor, has designed an asthma educational intervention that fits into the regular academic health curricula. Her study, funded by the NIH, National Institute of Nursing Research, focuses primarily on medically underserved fifth grade students in urban school settings who have asthma. The intervention is provided in 10 classes that focus on what causes asthma episodes and how to get help during an episode. Students work on spelling words, math problems, reading assignments and other learning activities to describe what it’s like to live with asthma. They also practice how to tell someone when they’re having an asthma episode. The children have greater acceptance of their asthma and better health outcomes as a result.

For the past 13 years, Dr. Sharon Horner, professor and associate dean for research, has been testing and refining an educational intervention designed to improve rural children’s and their parents’ asthma self-management in a series of studies funded for a total of $3.6 million from the NIH, National Institute of Nursing Research and National Institute of Heart, Lung and Blood. Most studies of asthma self-management with children have been conducted with urban populations, and Horner is one of the few researchers to study the effects of asthma self-management education with Mexican Americans. All materials for the study are presented in English and Spanish versions to match the participants’ language needs. The intervention has resulted in significant improvements in family asthma management, children’s skill at using an inhaler, and reductions in days with asthma symptoms and limitations.

Adolescent Health

Dr. Lynn Rew, professor, is currently testing the feasibility of a brief intervention to enhance psychological capital in homeless young women.

This intervention, funded by the National Institute of Nursing Research, focuses on a
population of youth that is highly vulnerable to adverse physical and psychological outcomes. The brief intervention consists of group activities that help these women set realistic and attainable goals to improve their quality of life. This study is a component of Rew’s program of research that addresses the health behaviors of adolescents, for which she has received more than $5 million in continuous funding since 1999 from the National Institutes of Health.

**Chronic and Disabling Conditions**

**Dr. Alexa Stuifbergen**, dean of the School of Nursing, was among the first researchers to study health promotion in persons with chronic and disabling conditions. With continuous support totaling more than $9.6 million from the NIH, National Institute of Nursing Research and the National Institute for Child Health and Human Development from 1993 to the present, she has developed, tested and cross-validated a model of health promotion and quality of life in persons with chronic and disabling conditions — specifically chronic neurological conditions. Stuifbergen and her colleagues developed a wellness intervention for women with multiple sclerosis (MS) that significantly improved health behaviors (e.g., exercise and stress management) and improved pain and mental health. Her wellness interventions have been adapted for use with other groups including women with fibromyalgia, HIV and cancer survivors. Stuifbergen has most recently completed a study of a computer-assisted cognitive rehabilitation intervention for persons with MS.

**Dr. Tracie Harrison**, associate professor, worked with The Administration on Aging as a 2011-2012 Health and Aging Policy Fellow through the Atlantic Philanthropies to enhance policies that affect older Americans with disabilities. Findings from her earlier studies suggest that the lifestyles of women with disabilities are uniquely shaped to support their identity as women within the context of having impairments. Over the life course, they are often left to accommodate seemingly unpredictable impairment-related dilemmas by using trial-and-error, culturally predisposed problem solving while relying on socially predetermined resources. She is currently completing a qualitative study funded by the NIH, National Institute of Nursing Research, with Mexican American and white women with disabilities to discern the cultural influences of aging with disabilities. The ultimate goal of Harrison’s research is to develop a model of healthy aging for women with disabilities that can be used to understand changes that affect them across their life spans.

**Dr. Heather Becker**, research scientist at the School of Nursing, recognized that individuals with chronic and disabling conditions may find themselves managing other health conditions as they age (such as osteoporosis, cardiovascular disease or cancer). Becker’s most recent study, funded by the National Cancer Institute, explored health promotion for cancer survivors who had a pre-existing disabling condition, such as polio or multiple sclerosis. About half of the 145 people in the sample — primarily breast cancer survivors — had been diagnosed at least 10 years previously. They described various challenges they encountered in managing their cancer in addition to their prior disabling condition. Becker found that the social support received from others and self-efficacy for health-promoting behaviors were most strongly related to how often people engaged in health promotion in areas such as nutrition, stress management, physical activity, spiritual growth, interpersonal relationships and health responsibility. Using feedback from study participants, Becker also developed and pilot tested an online health promotion intervention for cancer survivors with pre-existing conditions.

**Emerging Scholars**

**Dr. Terry Jones** has more than 25 years of experience in nursing, including leadership positions in nursing administration, quality and operations. She completed a three-year clinical science training program in the North and Central Texas Clinical and Translational Science Initiative, during which she received a $50,000 pilot award to study “Nursing Interventions Using Real Time Location Systems and Wi-Fi Technology.” Jones was appointed assistant professor in 2010 and received the competitive intramural 2011 Summer Research Assignment (SRA) award from The University of Texas at Austin, which allowed her to complete the analysis of data collected that same year as part of the study “Implicit Rationing of Nursing Time and Care,” funded by an Ed and Molly Smith Centennial Fellowship award. She has recently received a competitive extramural research award ($5,000) from the Academy of Medical Surgical Nurses.

**Dr. Cherie Simpson** established the reputation of a serious, talented nursing scholar during her time as a doctoral student at the School of Nursing. She received a three-year pre-doctoral fellowship from the NIH for her proposal “Sleep: Effect on Dementia Caregiver Mastery, Perceived Stress, and Depression.” Appointed assistant professor, Simpson is currently conducting a pilot study assessing sleep in caregivers of persons with dementia with the support of a competitive 2012 Summer Research Assignment from The University of Texas at Austin. She will use the data to refine a caregiver sleep intervention specifically for use with caregivers of persons with dementia.
Funding Frontline Nursing Education Means a Healthier Future for All

The first time she stepped into the neonatal intensive care unit at Jefferson Davis Hospital in Houston, Texas, Christy Dauphin (BSN ’75) wasn’t sure what to expect. Surrounded by the blinking lights of the monitors and the tense expressions of anxious parents, she realized pretty quickly, however, that the arc of this learning curve would be steep and provide little margin for error.

Despite the intense atmosphere, the young nurse believed she was up to the task, thanks to the preparation she had received at The University of Texas at Austin School of Nursing.

“I had such great professors who were always accessible,” Christy said. “I felt from the beginning of my nursing career that I was ready for just about anything.”

Over the years, as Dauphin busily built a career in pediatric nursing and school health, she began to appreciate even more the strong foundation she had received at the School of Nursing. That’s when she began to think about doing something to help prepare other young nurses by giving back to the institution that had launched her career.

After talking it over with her husband, David, an accounting graduate of Baylor University, the couple decided to make a donation that would ensure that students who wanted to pursue graduate degrees in order to teach would have the necessary funding.

“We have been blessed and feel very strongly that we need — and want — to give back,” said David. “Whether that’s by funding nursing education or contributing to cancer research and prevention, we decided to target organizations and institutions that are doing the most important work.”

Their gift couldn’t have come at a better time. A growing need for nurses has many schools and colleges, including the UT at Austin School of Nursing, scrambling to hire more faculty members. But finding qualified nursing educators has been a challenge. Now, with the Dauphin’s gift endowing a fund for graduate students, the School is poised to educate greater numbers of the finest teachers in the field.

“We receive applications every year from many more students than we have faculty to teach. To meet that need, we have to educate more teachers,” said Alexa Stui Bern, dean of the School of Nursing. “The generosity of our school’s friends and alumni, such as Christy and David, helps to make it possible for many of our top-notch students to pursue doctoral degrees and one day teach the next generation of nurses.”

The Dauphins couldn’t be happier about their part in producing tomorrow’s nursing educators.

“Nurses are on the frontline of the health-care system,” Christy said. “That’s why it’s so important that they have the best training and skills possible.”

Why I Give

I’m an alumnus of The University of Texas at Austin School of Nursing and contribute to nursing education for two reasons. First, I am very thankful for the education I received at the School. The support and dedication of the staff on a professional and personal level taught me a great deal and prepared me for my nursing career — and continue to do so every day. Second, the need for well-educated and compassionate nurses continues and will only increase as our population ages. The School of Nursing offers a well-rounded education and prepares nurses to focus on providing the best care, wherever they decide to work. It is one of the best places for nurses to be trained.

—Gerardo (Jerry) Chavez, RN, MSN, OCN, Class of 2003

My husband, Greg, and I are graduates of The University of Texas at Austin — the Business School and the School of Nursing respectively — and believe that our successful careers are largely the result of the excellent education we received. We feel it is important to give back and so we chose to donate to the School of Nursing because we knew our donation would go to necessities. Last year, Andria Brannon, director of development, helped us identify an important area to fund, and we gave to the Children’s Wellness Center. She explained that our gift would help purchase vaccinations and medications for the young patients of the Center. We so appreciate being informed of the school’s activities and needs and we intend to continue to donate to the School of Nursing as long as we are able.

—Greg Farris, BBA, Class of 1996, and Libby (Torres) Farris, BSN, Class of 1998

I really believe that it is my responsibility to give back to the school that did so much for me. In 1963, I got an opportunity as a clinical assistant to teach “Fundamentals of Nursing” with Dr. Billye Brown, former dean of the School of Nursing — the first course ever taught at The University of Texas at Austin School of Nursing! Some of my students struggled to pay tuition, and since I had been a recipient of financial assistance as both an undergraduate and graduate student, I decided to donate so that students can receive the assistance they need to complete, or continue, their education.

—Christina R. Frias, MS, RN (retired), Class of 1962

Donor Spotlight

David and Christy Dauphin

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I’m an alumnus of The University of Texas at Austin School of Nursing and contribute to nursing education for two reasons. First, I am very thankful for the education I received at the School. The support and dedication of the staff on a professional and personal level taught me a great deal and prepared me for my nursing career — and continue to do so every day. Second, the need for well-educated and compassionate nurses continues and will only increase as our population ages. The School of Nursing offers a well-rounded education and prepares nurses to focus on providing the best care, wherever they decide to work. It is one of the best places for nurses to be trained.

—Gerardo (Jerry) Chavez, RN, MSN, OCN, Class of 2003

My husband, Greg, and I are graduates of The University of Texas at Austin — the Business School and the School of Nursing respectively — and believe that our successful careers are largely the result of the excellent education we received. We feel it is important to give back and so we chose to donate to the School of Nursing because we knew our donation would go to necessities. Last year, Andria Brannon, director of development, helped us identify an important area to fund, and we gave to the Children’s Wellness Center. She explained that our gift would help purchase vaccinations and medications for the young patients of the Center. We so appreciate being informed of the school’s activities and needs and we intend to continue to donate to the School of Nursing as long as we are able.

—Greg Farris, BBA, Class of 1996, and Libby (Torres) Farris, BSN, Class of 1998

I really believe that it is my responsibility to give back to the school that did so much for me. In 1963, I got an opportunity as a clinical assistant to teach “Fundamentals of Nursing” with Dr. Billye Brown, former dean of the School of Nursing — the first course ever taught at The University of Texas at Austin School of Nursing! Some of my students struggled to pay tuition, and since I had been a recipient of financial assistance as both an undergraduate and graduate student, I decided to donate so that students can receive the assistance they need to complete, or continue, their education.

—Christina R. Frias, MS, RN (retired), Class of 1962
**New Appointments**

The School of Nursing is pleased to welcome four new tenure-track faculty members.

**Jane Dimmitt Champion, PhD, DNP, MA, RN, FNP, AH-PMH-CNS FAAN** has been appointed as a professor. Her research focuses on prevention of abuse, substance use, STI/HIV and unintended pregnancy. Through a program of interdisciplinary clinical research funded by the National Institutes of Health, she developed gender- and culture-specific, evidence-based community interventions for particularly vulnerable at-risk minority populations of women and adolescents. Champion’s approach to these populations is consistent with recent developments in health research emphasizing the inclusion of community members and the social construction of knowledge.

**Karen Johnson, PhD, RN** has been appointed as an assistant professor and comes to Austin from the University of Minnesota School of Nursing where she was a pre-doctoral fellow in the Center for Adolescent Nursing. She also taught nursing research and public/community health at Metropolitan State University, St. Paul, Minnesota. Johnson’s specialization is public health nursing and adolescent health.

**Kavita Radhakrishnan, PhD, BSN, MS** was named assistant professor. She received her PhD and BSN from the University of Massachusetts at Amherst. Her research focuses on ways to implement home health-care technology such as remote monitoring and homecare EHR to transform and improve current practices in caring for elderly individuals with chronic diseases. Radhakrishnan is a recipient of the Johnson and Johnson Promise of Nursing Fellowship Award.

**Bo Xie, PhD, MS** has been named associate professor and comes from the College of Information Studies at the University of Maryland, College Park, Maryland. Her research focuses on geriatric health informatics issues and is funded by the National Institutes of Health’s National Institute on Aging.

**In Memoriam**

**Dr. Emily Cornett**

**Dr. Jerry Blaylock**

**Dr. Betsy Bowman**

**Dr. Dorothy Blume**

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**Faculty Update**

**Nursing Professors Receive One of Nursing’s Highest Honors**

Three faculty members with the School of Nursing at The University of Texas at Austin will be inducted as Fellows of the American Academy of Nursing, one of the highest honors in nursing. **Dr. Linda Carpenter, Dr. Alexandra Garcia** and **Dr. Gayle Timmerman** are among 176 nurse leaders to be inducted during the Academy’s 39th Annual Meeting on Oct. 13, 2012, in Washington, D.C.

“Academy fellowship represents the nation’s top nurse researchers, policymakers, scholars, executives, educators and practitioners,” said Alexa Stulbergen, dean of the School of Nursing. “It takes extraordinary dedication, intellect and perseverance to become a successful researcher-educator, and we are proud that three of our faculty members have been recognized with this award.”

Carpenter is associate professor of clinical nursing and assistant dean for student affairs. She teaches graduate courses for students in the nursing education concentration, serves on the Education Advisory Committee and conducts faculty development programs and orientations. Carpenter was recently awarded two grants from the Texas Workforce Commission to create a certificate program to prepare practicing nurses for faculty positions and to ease the nursing faculty shortage.

Garcia is associate professor in the family and public health nursing and nursing administration division. She is director of the master’s degree public health nursing concentration and coordinates study abroad programs. Her research focuses on the symptom experience of Mexican Americans with type 2 diabetes and the exploration of social, cultural and economic influences on health promotion practices; and diabetes self-management and quality of life.

Timmerman is associate dean for academic affairs and associate professor. Her research targets eating patterns in women that influence weight, such as binge eating, dieting and emotional eating. Her current work focuses on restaurant eating, a high-risk food environment implicated as contributing to the obesity epidemic. She developed “Mindful Restaurant Eating,” a successful weight gain prevention intervention for women who eat out frequently. Her work has received national and international attention in various media and publications.

**Robert Wood Johnson Foundation Executive Nurse Fellow Award**

**Linda Yoder, PhD, MBA, RN, FAAN**

**Linda Yoder**, associate professor and director of the nursing administration graduate concentration, was named an Executive Nurse Fellow by the Robert Wood Johnson Foundation, which recognizes the effectiveness of nurse leaders in improving the nation’s health-care system. In addition to her responsibilities at the School of Nursing, Yoder collaborates with the Seton Family of Hospitals and the St. David’s Hospital System in Austin, Texas, on nursing research and evidence-based practice initiatives. She is currently completing a longitudinal study examining quality of life experienced by burn survivors after they are discharged from the Military Burn Unit located in the San Antonio Military Medical Center at Fort Sam Houston, Texas.
Student Awards and Scholarships

The School of Nursing is proud of all its students, but now and again some of them are recognized beyond these hallowed halls for their intelligence, diligence and dedication. During 2012, the following six students garnered some of the most prestigious awards available to students in any discipline.

Kate Bell, RN, received a fellowship from the Archer Graduate Program in Public Policy, which allowed her to participate in an internship at the Oncology Nursing Society’s legislation and advocacy office in Washington, D.C. There she worked with other professionals to influence health-care agencies and political systems to implement changes in the health care delivered to oncology patients. She is pursuing a master’s degree at the School of Nursing as a clinical nurse specialist with an emphasis on adult oncology nursing.

The Archer Center is a self-supporting component of the University of Texas System that strives to enable students across Texas to take advantage of opportunities in Washington, D.C. Bell was one of 16 graduate students chosen for the 2012 award and is the first nursing student to be selected. Her travel was made possible by funding from the Lee and Joe Jamail Dean’s Endowment for Excellence in the School of Nursing.

Eduardo Chavez, RN, BSN (’08), MSN (’12), was named a Nurse Leader Scholar by the Jonas Center for Nursing Excellence. Chavez received a Master of Science in Nursing Administration in May 2012 and is currently pursuing a doctoral degree. His research focuses on leadership characteristics and behaviors of bedside nurses. The Jonas Nurse Leaders Scholar program was launched in 2008 by Barbara and Donald Jonas to increase the number of doctorally prepared faculty available to teach in nursing schools nationwide, as advocated by the Institute of Medicine’s recent report The Future of Nursing: Leading Change, Advancing Health.

Hsiu-Rong Cheng, RN, received the Harrington Dissertation Fellowship, which is a one-year award for graduate students at The University of Texas at Austin who are candidates for a doctoral degree. She is currently researching postpartum weight retention in Taiwanese women. Cheng will present her research results in the coming academic year and is on track to graduate from the PhD program in 2013.

The yearlong Harrington Dissertation Fellowship provides a $36,000 stipend, plus full tuition and required fees, and an allowance of $2,000 for travel, equipment, books or other professional expenses.

Masood Iqbal, RN, CNS, is the first graduate student at The University of Texas at Austin to be awarded the M. D. Anderson Cancer Center Oncology Fellowship, a paid yearlong fellowship designed to give advanced practice nurses experience in all aspects of oncology care. Fellows also select and pursue an oncology specialty area for clinical focus and practice. Applicants must have a minimum of a clinical master’s degree in nursing from an accredited university, be recognized as a clinical nurse specialist or nurse practitioner by the Texas Board of Nurse Examiners, be licensed as a registered nurse in the state of Texas, have two years nursing clinical experience and have current clinical experience in the advanced practice role.

Rhonda Nembhard, RN, received a Rotary Foundation Ambassadorial Scholarship, which will allow her to travel to Spain and study at the University of Malaga from July 2012 to June 2013. Nembhard is currently pursuing a Master of Science in Nursing with a concentration in public health. The Ambassadorial Scholarships program seeks to further international understanding and friendly relations among people of different countries and geographical areas and develop leaders who can address the humanitarian needs of the world community.

Janiece Walker, RN, MSN (’09), was named a John A. Hartford Foundation Patricia G. Archbold Scholar. The two-year $150,000 scholarship is funded by a grant to the Gerontological Society of America by the John A. Hartford Foundation and will allow Walker to continue her doctoral studies with her mentor Dr. Tracie Harrison. Walker’s research focuses on geriatric nursing, specifically in the area of minorities aging with disabilities.
**A Success from the Start**

**NAMED FOR THE ICONIC LAMP** carried by Florence Nightingale, the Golden Lamp Society was established to foster a tradition of philanthropy within The University of Texas at Austin School of Nursing. By recognizing alumni and friends who make annual donations to the School, the Society honors the commitment of individual donors to the future of Nursing.

Since its launch in September 2011, the society has conferred an array of benefits to more than 185 members, including exclusive invitations to research events, open houses and “Dinner with the Dean.”

To learn more about the giving levels and benefits, visit [www.utexas.edu/nursing/html/giving/golden.html](http://www.utexas.edu/nursing/html/giving/golden.html).

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**THE FOLLOWING ARE 2011-2012 GOLDEN LAMP SOCIETY MEMBERS**

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<tr>
<th>Position</th>
<th>Name</th>
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<tr>
<td>DEAN’S CIRCLE</td>
<td>Julie M. Bailey&lt;br&gt;David and Christy Dauphin&lt;br&gt;Joseph D. Jamail&lt;br&gt;Dr. Bonnie L. Rickelman&lt;br&gt;Dr. Alexa Stuulbergen and Mr. Robert Stuulbergen&lt;br&gt;Nancy and David Temple&lt;br&gt;Dr. Mary E. Walker</td>
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<td>BENEFACTORS</td>
<td>Dr. Lynn Rew and Mr. Richard Rew</td>
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<td>CHAMPIONS</td>
<td>Dr. Guardia E. Banister&lt;br&gt;Dr. Billye J. Brown&lt;br&gt;Dr. Sharon A. Brown&lt;br&gt;Jill D. Carr&lt;br&gt;Lynn and J. Mason Carter&lt;br&gt;Libby and Greg Farris&lt;br&gt;Christina Frias&lt;br&gt;Dr. R. LaVerne Gallman&lt;br&gt;Tracy Guthrie&lt;br&gt;Dr. Sharon D. Horner&lt;br&gt;Debra and James Hughey&lt;br&gt;Jackie Hynek&lt;br&gt;Ruth and Leroy Lange&lt;br&gt;Dr. Timothy T. Lin&lt;br&gt;Dr. Rose M. Mays&lt;br&gt;Sherry McGillcuddy&lt;br&gt;Drs. Carolyn and Gary Mueller&lt;br&gt;Kristi and Michael Oldham&lt;br&gt;Michael Portman&lt;br&gt;Alisa Cohen-Victoria and Alexander Victoria&lt;br&gt;Dr. Marlene H. Weitzel&lt;br&gt;Manuel Zuniga</td>
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<td>PARTNERS</td>
<td>Jan T. Fox&lt;br&gt;Karrie and Robert Groves&lt;br&gt;Dr. Clare A. Houseman&lt;br&gt;Dr. Bette R. Jacobs&lt;br&gt;Dr. Sharon L. Jacques&lt;br&gt;Dianne J. Kline&lt;br&gt;Mr. Wayne T. Modesette&lt;br&gt;James J. O’Neill&lt;br&gt;Dr. Marilyn M. Pattillo&lt;br&gt;Dr. Beverly Reigle and Mr. Daniel H. Reigle&lt;br&gt;Dr. Karen R. Robinson&lt;br&gt;Katherine R. Sorre&lt;br&gt;Dr. and Mrs. Kent T. Starr&lt;br&gt;Dr. Bobbie S. Sterling&lt;br&gt;Jan and Nicola Tannous&lt;br&gt;Nancy Tucker&lt;br&gt;Dr. Deborah L. Volker&lt;br&gt;Sally J. Wilging</td>
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<td>ADVOCATES</td>
<td>Michelle Priolo&lt;br&gt;Rebecca Redland-Sturzl&lt;br&gt;Dr. Rebecca Sisk&lt;br&gt;Rebecca and David Smith&lt;br&gt;Dr. J. Carole Taxis&lt;br&gt;Barbara Wall&lt;br&gt;Dr. Linda H. Yoder</td>
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<td>ADOVOCATES</td>
<td>Dr. Gayle J. Acton&lt;br&gt;Sunya A. Alexander&lt;br&gt;Dr. Dolores M. Alford&lt;br&gt;Mary Jane Allen&lt;br&gt;Audrey H. Bareiss&lt;br&gt;Susan V. Baxley&lt;br&gt;Katherine G. Beck&lt;br&gt;Dr. Rosemary V. Bellone&lt;br&gt;Theresa E. Bennett&lt;br&gt;Dr. Judith E. Beyer&lt;br&gt;Patricia L. Birch&lt;br&gt;Karen Hjeltmancik Blakley&lt;br&gt;Dr. Betty L. Broom&lt;br&gt;Dr. Gerald T. Brouder&lt;br&gt;Johnnie Sue Buciek&lt;br&gt;Lisa K. Burns&lt;br&gt;Gerardo Chavez&lt;br&gt;Michelle H. Coffey&lt;br&gt;Rachael L. Conard&lt;br&gt;Dr. Janet A. Conway&lt;br&gt;Dr. James L. Copeland, Jr.&lt;br&gt;Dr. Doris D. Coward&lt;br&gt;Sierra B. de Weese&lt;br&gt;Dr. Margaret Dick&lt;br&gt;Jessica L. Dodge&lt;br&gt;Kathleen M. Dwight&lt;br&gt;Sheila J. Easley&lt;br&gt;Eloise S. Ellis&lt;br&gt;Janet E. Fannin&lt;br&gt;Nancy M. Finch&lt;br&gt;Penny Herndon-Finuf and Bernard D. Finuf&lt;br&gt;Dr. Gerry Fletcher and Col. Tyler H. Fletcher&lt;br&gt;Maria-Jovina Fonbuena&lt;br&gt;Dr. Lorraine Freitas&lt;br&gt;Kay L. Fulton</td>
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<td>ADOVOCATES</td>
<td>Dr. Jean E. Garrett&lt;br&gt;Carol and Reynaldo Gonzales&lt;br&gt;Kelly M. Gorham&lt;br&gt;Nancy R. Gurkin&lt;br&gt;Dr. Kathryn S. Haddock&lt;br&gt;Caroline S. Hadley&lt;br&gt;Cynthia S. Hammer&lt;br&gt;Wendy Haney&lt;br&gt;Dr. Carole A. Hanks&lt;br&gt;Anna L. Hans&lt;br&gt;Marvin Heller&lt;br&gt;Dr. Michael Heilman and Mrs. Jane Heilman&lt;br&gt;Dr. Keela A. Herr&lt;br&gt;Berta and Scott Herstein&lt;br&gt;Dr. Joanne V. Hickey&lt;br&gt;Dr. Alice S. Hill&lt;br&gt;Jean Hills&lt;br&gt;Anne E. Howe&lt;br&gt;Karen M. Hull&lt;br&gt;Dr. Karrie H. Ingalsbe&lt;br&gt;Dr. Barbara L. Irvin&lt;br&gt;Dr. Julie S. Johnson&lt;br&gt;Heidi D. Kaska&lt;br&gt;Elaine Wright Kasper&lt;br&gt;Dr. Mary P. King&lt;br&gt;Terri D. Knox&lt;br&gt;Dr. Ferne N. Kyba&lt;br&gt;Herbert Laing&lt;br&gt;Dr. Billye J. Landis&lt;br&gt;Dr. Peggy J. Leapley&lt;br&gt;Dr. Helen Lee&lt;br&gt;Dr. Li-Chen Lin&lt;br&gt;Haiyan Liu&lt;br&gt;Nancy A. Long&lt;br&gt;Dr. Janet E. Lord&lt;br&gt;Denise Lorraine&lt;br&gt;Christine D. Mcdonald&lt;br&gt;Dr. Roxanne W. McDaniel&lt;br&gt;Cynthia A. Medlin&lt;br&gt;Dr. A. Robin Meize-Grochowski&lt;br&gt;Dr. Sabrina Q. Mikan&lt;br&gt;Dr. Barbara K. Miller&lt;br&gt;Julie F. Moore&lt;br&gt;Patricia R. Morgan</td>
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<td>LEADERS</td>
<td>Cindy C. Morovitz&lt;br&gt;Janet and Philip Morrison&lt;br&gt;Kate Megan Murphy&lt;br&gt;Dr. Mary R. Nichols&lt;br&gt;Marlene K. Nickell&lt;br&gt;Elaine Pap&lt;br&gt;Courtney P. Parent&lt;br&gt;Dr. Yvonne M. Paris&lt;br&gt;Shannon H. Patton&lt;br&gt;Donna K. Payne&lt;br&gt;Marilyn M. Pitzinger&lt;br&gt;Andrea G. Presson&lt;br&gt;Dr. Virginia A. Rahr&lt;br&gt;Susan and Scott Ramsey&lt;br&gt;Judy K. Rose&lt;br&gt;Christine S. Rost&lt;br&gt;Jo E. Shaw&lt;br&gt;Dr. Gwen D. Sherwood&lt;br&gt;Ann and Thomas Shopoff&lt;br&gt;Dr. Erica P. Siddell&lt;br&gt;Sheila M. Smith&lt;br&gt;Dinea R. Smith&lt;br&gt;Norma Somohono-Mendiola&lt;br&gt;Dr. Martha B. Sparks&lt;br&gt;Dr. Rachel E. Spector&lt;br&gt;Andrea K. Stevens&lt;br&gt;Patricia and David Swank&lt;br&gt;Dr. Margaret A. Taylor&lt;br&gt;Majera Teresa M. Thorley, U.S.A.F. &lt;br&gt;Melissa and David Tierney&lt;br&gt;Dr. Gayle M. Timmerman&lt;br&gt;Joan R. Vogel&lt;br&gt;Anne M. Weir&lt;br&gt;Suzanne Wheat&lt;br&gt;Dr. Grace A. Willard&lt;br&gt;Kristen N. Williams&lt;br&gt;Dr. Gay Joan Winter&lt;br&gt;Peggy A. Wunneberger&lt;br&gt;Marit V. Young</td>
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“I give to the School of Nursing because I am impressed with the depth of the faculty research there and the School’s involvement in the Austin community. I worked at three University of Texas campuses during my thirty-year higher education career and feel very fortunate to be in a position to give back to the campus where I received my degree and started my career. I also appreciate the many areas I can give to: the Children’s Wellness Center, the simulation lab or to support a student. No matter how I give to the School of Nursing, I am directly affecting the education of future nurses. I like this.”

– DIANNE KLINE, DONOR

To learn more about donating to the School of Nursing, contact: Andria Brannon, Director of Development, 512-471-5237, abrannon@mail.nur.utexas.edu

Thank you.