One of my pet peeves emerges when I am in a group of health care providers who are asked to introduce themselves and describe their work. I listen as each professional details his or her important and unique contributions to the work at hand. My attention turns expectantly to the nurse member of the group and my disappointment is acute when I hear “oh, I am just a nurse.” Like a punctured balloon, my pride in our profession deflates and flattens.

Really - is that what we think of ourselves? Is that the value we place on the intense, intimate, skillful and demanding work we do each and every day? Is that really how we want to represent ourselves and our profession to others? Is that the leadership we ascribe to as nurses?

If so, then it’s no surprise that we receive little credit in the media for our central role in health care, or that we remain the invisible glue of the health care system. If we cannot articulate clearly, confidently and proudly what we contribute and the many talents we have, then we cannot complain when our profession is overlooked or marginalized under the umbrellas of those professionals who can and do speak up and describe their value to others.

At no other time in the history of nursing have we been seen as such a valued health care provider by the public at large. We have a decade, yes a full decade, of repeatedly being identified in Gallup polls as the most trusted and ethical of all professions. So we must internalize this external feedback and proudly and thoughtfully take every possible opportunity in every possible forum to describe what we do and the essential role we play in health care, not only today but in the future. In truth, we are not “just a nurse” we are “essentially a nurse”....Gail
Charleston selected as a VA innovation center

Charleston has been chosen as one of 19 nationally funded Veterans Health Administration (VHA) Centers of Innovation (COiN) that will be funded for up to five years. The VHA initiated the COiN program to promote innovative research, facilitate partnerships and collaboration across disciplines, and increase the impact of health services research on the health and health care of veterans.

Charleston’s innovation center is named the Health equity and Rural Outreach innovation Center (HeROiC). HeROiC’s mission is to improve access and equity in health care for all Veterans by eliminating geographic, racial/ethnic, and gender-based disparities. HeROiC focuses on three areas of research: health equity, access to care, and rural health.

An important role of the COiN initiative is to facilitate productive partnerships between researchers and those who implement valid findings. Toward this end, HeROiC has sought out a diverse team of partners to help test and disseminate interventions, improve methodologies for analyzing health equity data, develop an equity report card using VHA administrative data, and refine metrics for measuring access to care. The College of Nursing is among the HeROiC’s partners.

Charlene Pope, PhD, MPH, CNM, FAAN, associate professor and chief nurse for research at the Ralph H. Johnson VA Medical Center, leads the Implementation/Partner Research Core in the new COIN. “HEROIC’s talented and multidisciplinary team of health services researchers are positioned well to advance knowledge and innovations that reduce health disparities to veterans nationwide,” says Pope. “The greatest asset to our program is our dynamic group of interdisciplinary researchers dedicated to eliminating disparities. We welcome new opportunities for collaboration with nurse researchers interested in improving the access and equity of healthcare for all veterans.”

VANA initiative extended

The Veterans Affairs Nursing Academy (VANA) was established in 2007 as a five-year pilot program to facilitate stronger and mutually beneficial partnerships between the Department of Veterans Affairs and the College of Nursing. VANA incentivized the development of new models of academic partnerships based on strong and trusting relationships, shared faculty and trainees, innovation in education and patient care, and an emphasis on scholarship and inquiry. Financial support from the VA central office ended August 31, 2013, necessitating a transition to local sustainment of the partnership that has been extended for three years.

Authentication for mobile devices

You must enroll or complete the mobile security and two-factor authentication now. If you are not enrolled by Oct 1, you will not be able to gain access to your MUSC email via a mobile device and/or remote laptop. Click here to enroll now.

In addition, MUSC students and employees will no longer be able to auto forward MUSC email to an outside email account such as Gmail or Yahoo.
**CAALENDAR OF EVENTS**

**SEPTEMBER**

- **MON 02** Labor Day  
  CON Closed

- **TUE 03**  
  3rd Annual Virtual PhD Student Research Day  
  2:00 - 4:30 PM  |  HOT 910  
  Ten PhD students will present research as posters online using AdobeConnect in front of faculty, doctoral and undergraduate students. SRD provides the students an opportunity within our program to hone their skills in developing a poster as well as presenting their research.

- **FRI 06**  
  Undergraduate Faculty Retreat  
  9:00 - 4:00 PM  |  ART-Stuart Smith Conference Rm  
  Regular and clinical adjunct faculty are invited. Lunch to be served. Topics include: BSIT, clinical skills, communication mapping, strategic planning.

- **WED 11**  
  Research for Lunch  | "Impact of COPE on family management of pediatric epilepsy" presented by Janelle Wagner & Gigi Smith  
  12:00 PM  |  HOT (3rd floor)  
  Bring your own lunch; RSVP to Raquel Vining at vining@musc.edu

**OCTOBER**

- **THU 12** MUSC Board of Trustees Meeting  
  Thursday & Friday

- **Save the Date**  
  November 8

Have an interest in Florence Nightingale? Lynn McDonald, PhD, professor emerita at the University of Guelph, Ontario, will lead a discussion on Florence Nightingale and how her principles are being used today as nurses and nurse faculty.

More details to come next month.

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**Do you use Google+?**

Google Plus is an online venue where many nurses and nursing organizations have started to connect with one another. Many nurses, nursing students, and hospitals use their Google Plus accounts to share news and discuss topics that affect the growing field of nursing.

Recently, Google Plus ranked MUSC CON as one of the "Top 100 Nursing Pages to Follow." This list isn’t necessarily a ranking, but a repository of stories and interests representing individuals and groups from across the nursing spectrum. Whether you’re a nursing student or an advanced practice nurse, this is a list of who you should follow using Google Plus.

Follow CON on Google Plus
Students selected for funding

ANET FUNDING
In October 2012, the College of Nursing was awarded a $700,000 HRSA grant for the Advanced Nursing Education Traineeship (ANET) program. The purpose of this grant is to increase the number of primary care nurse practitioners. This grant provides funds for 28 nurse practitioner students over a two-year period. These students have made a commitment to work in rural or medical underserved communities providing primary care after graduation. For the 2013-2014 academic year, the following 20 nurse practitioner students have been selected to receive ANET funding: Cheryl Allen, Elizabeth Barlow, Elizabeth Batten, Jennifer Berry, Virginia Borders, Jameela Carson, Simone Chinnis, Sarah Didow, Shelli Gibbs, Anthony Gudoski, Mary Hegedus, Wesley Jacobs, Casey Miller, Janice Moore, Kimberly Mouzon, Elizabeth Murray, Taylor Nannery, Tarita Patterson, Gary Szeto, and Tonya Wagner.

ANEERT FUNDING
In October 2010, the College of Nursing was awarded a $1.42 million HRSA grant for the Advanced Nursing Education Expansion (ANEET) program. The purpose of this grant is to increase the number of primary care nurse practitioners in South Carolina. This grant provides funds to individuals for two years to 30 nurse practitioner students. For the 2013-2014 academic year the following six students have been selected to receive ANEET funding: Amanda Friedlander, MSN/APN student (beginning fall 2013) Jennifer Wagner, MSN/FNP student (beginning fall 2013) Brittany Minor, DNP/FNP student (beginning spring 2014) Cameo Green, DNP/FNP student (beginning spring 2014) AnnaKathryn Keipler, DNP/FNP student (beginning spring 2014) Erin Whittington, DNP/FNP student (beginning spring 2014)

Helwig recieves Rotary Club Scholarship
Stephanie Helwig, BSN student, was recognized with a scholarship from the Sunset Rotary Club of Hilton Head, SC. The scholarship recognizes a student from the Beaufort/Hilton Head area who is enrolled in a BSN degree program.
A Dean’s List student, Stephanie earned a previous bachelor’s degree in biology from the University of Chicago. Prior to returning to school, Stephanie worked as a stroke coordinator for the MUSC Department of Neurosciences coordinating three research studies, including the “Stenting and aggressive medical management for prevention of stroke in the intracranial stenosis trial.” She is listed as a collaborator on two pending publications related to this research. She is a recipient of a MUSC Employee Excellence Award and has volunteered for numerous activities at the Ronald McDonald House and Hollings Cancer Center.

DNP students display mastery in final projects
Congratulations to five DNP students who presented their final poster presentations in July. Their practice improvement projects demonstrated synthesis and mastery of an advanced specialty within nursing practice. This DNP residency course was taught by Sharon Bond, PhD, CNM, FACNM, and Barbara Edlund, PhD, APRN, ANP-BC.

Rory Brodie
“Educational intervention for post operative orthopedic pain management”

Elizabeth Connor
“Improving detection of depression among older adults: A primary care practice change”

Njideka Osuala
“Primary care interventions to promote a healthy lifestyle in children”

Julia Rogers
“Effectiveness of a depression screening protocol for military spouses”

Mary Satterfield
“Screening for vitamin D deficiency in children: Improving adherence to AAP clinical practice guidelines”

Doctoral student successes
Phyllis Raynor, PhD student, has been selected for a fellowship in the Substance Abuse and Mental Health Services Administration’s Minority Fellowship Program at the American Nurses Association. Click here to read more.

Sue Zayac, DNP student and nurse practitioner, was awarded the 2013 South Carolina Award for Excellence by the American Association of Nurses Practitioners. She also precepts NP, PA and medical students in her role in MUSC’s emergency medicine department.
Funded grants

Congratulations to Janelle L. Wagner, PhD, for receiving $35,000 from Mr. Jack Henkin & Louise S. Pearson. This gift is made in memory of their late son, William A. Henkin and it is intended for the use in Dr. Wagner’s studies on depression in youth with epilepsy. The study titled “Exploration of a Depression Screening Tool for Youth with Epilepsy” will evaluate the psychometric properties and utility of the Neurological Disorders Depression Inventory for Epilepsy-Youth version (NDDI-E-Y), an evidence-based depression screening tool revised for youth with epilepsy.

Submitted grants

Elaine Amella, PhD, RN, FAAN and Roger Watson, PhD, RN, FAAN from the University of Hull (UK) have submitted a proposal for the very competitive Marie Curie Award titled, “Extending the range and utility of the Edinburgh Feeding in Dementia (Ed-FED) scale,” that is sponsored by the European Union. If funded, this award would allow Dr. Amella to be supported as an International Incoming Fellow and work with Dr. Watson for 12 months in the United Kingdom on mealtime issues in persons with early and moderate dementia.

Publications


NIH news

NIH Updates PHS 398 & SF 424 (R&R) for due dates beginning Sept. 25

NIH has announced the availability of new application instructions and forms for paper-based PHS 398 applications and a new application guide instructions for electronic SF 424 (R&R) applications. The new application instructions and forms MUST be used for applications intended for due dates on or after September 25, 2013. For more information, see NIH Guide Notice NOT-OD-13-091.

Modifications to NIH’s Planned and Cumulative Inclusion Enrollment Forms

NIH has modified the forms used to provide us with information on planned enrollment and actual cumulative enrollment of individuals involved in clinical research studies in accordance with NIH’s inclusion policy. The policies for the inclusion of women and minorities in clinical research and collection of participants’ sex/gender, race, and ethnicity have not been modified, however. Read more about the modified enrollment reports in the NIH Guide notice, and find additional resources including a podcast, narrated slide deck, and frequently asked questions on grants.nih.gov.

Is your award compliant with the Public Access Policy?

The NIH Public Access Policy ensures that the public has access to the published results of NIH funded research. It requires scientists to submit final peer-reviewed journal manuscripts that arise from NIH funds to the digital archive PubMed Central upon acceptance for publication. To help advance science and improve human health, the policy requires that these papers are accessible to the public on PubMed Central no later than 12 months after publication.

Preparation is key to avoiding delays in funding. Some suggestions:

- Use My NCBI’s My Bibliography feature to monitor public access compliance for all the applicable papers that you author or arise from your NIH award. Be sure to create an account using your eRA Commons ID, or link your current account with your eRA Commons account.
- As you plan a paper or support one with your NIH award, discuss with the authors how the paper and the NIH awards that support it will comply with the public access policy.
- Click here for more information

New to NIH grants? Grants process overview

Any successful project requires planning, development, implementation, and follow-through. Obtaining NIH funding for your research idea is no exception. The grants process overview provides an overview of the steps required for an application to proceed from application planning and submission through award and close out. Look to the related resources on each page for special guidance from NIH experts that can help maximize your understanding of the grants process and help you submit a successful grant application.
Charleston PASOs becomes AmeriCorps VISTA site

The City of Charleston, serving as the project sponsor for the Charleston AmeriCorps VISTA (Volunteers in Service to America) program, announced the host sites for the August 2013-August 2014 year. AmeriCorps*VISTA is a program of the Corporation for National and Community Service, and the purpose is to fight poverty by building the capacity of organizations and agencies in the community.

The project, the Charleston Area Service Collaborative, is focused on the areas of education and veterans, and the three year goal is to put in place sustainable systems through which programs are offered to children, families, and veterans. The program’s aim to be seamless rather than fragmented, navigable rather than cumbersome, and effective rather than mediocre. Each VISTA member serves a one year term of service with a selected agency during which they work to alleviate poverty by increasing the capacity of organizations and agencies in the community to build sustainable programs that fight illiteracy, improve health services, foster economic development, and otherwise assist low-income communities.

This year, MUSC-PASOs was selected as one of 25 sites to host VISTA members. After carefully screening and interviewing various individuals to work as a “promotor” (community health worker) development specialist, PASOs ultimately selected VISTA member Erin Burks from Chapel Hill, NC. Erin recently graduated from the University of North Carolina at Chapel Hill with a bachelor’s degree in global studies and speaks Spanish. She will make a year-long, full-time commitment to serve on the promotores project. Her efforts will be focused on building the promotores’ capacity to fight barriers that prevent Latinos from accessing health services.

Mayor Riley said, “Our vision is to foster the capacity of the agencies and organizations already doing great work in our community to help them build on their success. AmeriCorps VISTA brings incredible human talent into our community, and members infuse energy and a new perspective in the projects they take on. Their positive impact will be felt for years to come. We are so pleased to be able to serve as the Project Sponsor for the entire Charleston region.”

VISTA was founded in 1965 as a national service program designed to fight poverty in America and became part of the AmeriCorps network in the early 90’s. Today, VISTA provides full-time members to nonprofit, faith-based and other community organizations, and public agencies to create and expand programs that bring low-income individuals and communities out of poverty.

Practice your clinical skills

In response to student requests to practice nursing skills and procedures, Ruth Henderson, MSN, RN, CON clinical instructor will be available to help students brush up on skills seldom performed or who want more practice on particular nursing skills. The extra help sessions will be held in the Simulation Lab on Wednesdays and Thursdays between 3:00 - 4:00 p.m. during fall semester. If you have any questions, contact Ruth at henderr@musc.edu or Nancy Duffy at duffynd@musc.edu.
As we face the many challenges related to delivering high quality, patient-centered health care and strive to make it available to the broadest number of patients, the number of primary care physicians per patient continues to decrease. On top of this, we will see millions of new patients added to the health care rosters with the incorporation of the Affordable Care Act next year. It is expected that the U.S. will have a shortage of 65,800 primary-care physicians by 2025. This decrease in the primary care workforce makes it more difficult for patients to access routine and preventative health care. Furthermore, it creates challenges for patients managing complex and chronic health-care conditions. Advanced practice nurses (APRNs) have a longstanding role as both primary care and sub-specialty care providers. The majority of APRNs are educated in primary care tracks and, 75 percent of APRNs are actively practicing in primary care. For purposes of this column, we will focus on the need for full scope of practice that allows nurse practitioners to practice to the fullest extent of their training as primary care clinicians delivering health care during this primary care shortage.

Enrollment and graduation rates from advanced practice nursing programs have risen at steady rates in the past several years with enrollments up by 63 percent and graduation rates up by 71 percent from 2005 through 2010. Of these, 89 percent of advanced practice nurse graduates are prepared in primary care and a consistent percentage of these graduates go on to provide primary care upon completion of their master’s or doctoral programs. With training as adult nurse practitioners, family nurse practitioners or pediatric nurse practitioners, primary care nurse practitioners are prepared to deliver care in a variety of settings. They diagnose and treat episodic conditions, provide health maintenance, manage chronic conditions and provide care coordination across the lifespan.

Here are some important advanced practice nursing facts:

- APRNs have full scope of practice in 17 states and the District of Columbia.
- 12 states require NPs to be supervised to varying degrees by a physician or other health authority.
- The remaining 21 states, including SC, mandate that APRNs have a collaborative agreement with a physician. This agreement varies widely among states.
- Both the National Governors Association and the Institute of Medicine have urged state legislatures to loosen laws restricting APRN practices.

- States that require greater physician supervision do not have higher patient safety records.
- APRNs are more likely to work in rural and underserved areas when granted full scope of practice. These areas are most hard-hit by the primary care physician shortage.
- 18 percent of APRNs practice in communities with fewer than 25,000 residents.
- In states with more restrictive APRN supervision requirements, they are less likely to practice in rural areas than in states with full scope of practice.
- 40 years of evaluation and research related to nurse practitioner practice consistently supports that they provide high quality and cost effective care.
- More than 88 percent of ANPs and FNPs accept Medicare.
- 89 percent of PNPs report treating children with Medicaid funding and most PNPs are accepting new patients with Medicaid.

With a proven track record of high quality, patient-centered health care, nurse practitioners possess the knowledge and skill to deliver primary care. APRNs need legislation aimed at full scope of practice in order to optimally deliver health care as part of the primary care workforce. As members of the nursing profession, we should advocate for full scope of practice in states where it is not part of the nurse practice act. We can accomplish this by contacting our state legislators and discussing the many reasons why APRNs are ready to provide primary health care to the growing number of citizens that need it.

References
Congratulations to Joy Lauerer, DNP, RN, PMHCNS-BC, instructor, for meeting graduation requirements for her Doctor of Nursing Practice degree from the University of Alabama. The newly titled Dr. Lauerer teaches courses in the undergraduate and graduate nursing programs.

Nancy Duffy, DNP, RN, CEN, CNE has been featured in an article from the Robert Wood Johnson Foundation’s New Careers in Nursing about increasing diversity and recruiting underrepresented nursing students. Check out what Nancy has to say about approaching and retaining a diverse populations of nursing students: NCIN grantees leading cultural shifts.

Congratulations to Maria Toler who became a grandmother for the fourth time. Her grandson, Oliver Benjamin Toler, was born on August 27 in Okinawa, Japan weighing 7 pounds, 9 ounces. Oliver’s father, David B. Toler, is currently on active duty in the Air Force serving on Okinawa, Kadena AFB. He and his wife, Ashton, also have a 4-year old daughter, Maddison Mae, who is now a proud big sister.

Training videos
CON’s Nursing Technology Center has created a video training section on CON’s intranet for all faculty and staff to use. These videos will help resolve simple issues and show you how to use many computer programs that are used in the College. Most of the videos were created by Bernie Jansen and Joel Green, while a few are from third party sources. You can view these videos on the intranet by logging in and clicking on the “Training” tab in the top menu bar. Bernie and Joel took the time to create these videos based on the needs they were hearing from faculty and staff, so please use them as a first step to learning more about your computer programs.

NEUROLOGY UPDATE FOR THE PRIMARY CARE PROVIDER
Presented by MUSC’s Department of Neurosciences and the Office of Continuing Medical Education
September 7, 2013
Doubletree Suites Hotel, 181 Church Street

Designed to provide physicians, PAs, NPs, and other primary health care providers who are involved in caring for adults and adolescents with the knowledge and skills to manage common neurological complaints in the primary care setting, and to implement strategies in practice resulting in best practices.
For details, visit www.musc.edu/cme.

ROPER ST. FRANCIS NURSING RESEARCH CONFERENCE
Stars at the Bedside: Making a Difference Through Nursing Research
October 14, 2013
Founder’s Hall at Charlestowne Landing
1500 Old Towne Road

Designed to highlight nursing research and the difference it has made in nursing practice. Conference objectives are to identify areas of nursing research and their impact on nursing; describe the important role staff nurses play in hospital-based clinical trials; and highlight the differences between evidence-based practice, nursing research and performance improvement by identifying examples of each from the poster presentations.

For details, contact Tanya Lott at Tanya.Lott@rsfh.com or (843) 402-1997.