September is a lovely month in its own right but it does mark the waning of summer and the rising of fall. Perhaps the best part of September in Charleston is the warming embrace of the waters as they lap at your toes or cover your nose. Lakes, oceans, rivers and ponds are all tepid with the sun's rays from a languid summer. Charleston's waters in September are like a luxurious bath or a soothing soak.

So this month I would like to share with you a passage from the Tao that I particularly like. It both focuses and challenges us as we think of pools of water and their mesmerizing ripples. Enjoy...Gail

The Ripple Effect

Do you want to be a positive influence in the world?

First, get your own life in order. Ground yourself in the single principle so that your behavior is wholesome and effective. If you do that, you will earn respect and be a powerful influence.

Your behavior influences others through a ripple effect. A ripple effect works because everyone influences everyone else. Powerful people are powerful influences.

If your life works, you influence your family.

If your family works, your family influences the community.

If your community works, your community influences the nation.

If your nation works, your nation influences the world.

If your world works, the ripple effect spreads throughout the cosmos.

Remember that your influence begins with you and ripples outward. So be sure that your influence is both potent and wholesome.

How do I know that this works?

All growth spreads outward from a fertile and potent nucleus. You are a nucleus.

This summer CON accepted 53 students into the revived online Registered Nurse to Bachelor of Science in Nursing (RN to BSN) program. The program was re-introduced in order to increase the number of nurses with the appropriate levels of education likely to be needed in the future.

Research findings, including the Robert Wood Johnson Foundation’s “Charting Nursing’s Future,” show there are better outcomes when nurses have a BSN or higher degree. To ensure the RN workforce achieves baccalaureate or higher degrees by 2020, colleges must become part of the innovative solutions that will develop the future generations of nurses.

“This is an exciting time as we embark on new endeavors to advance our nurses professionally,” said Dean Gail Stuart. “With changes in health care, we need a nursing work force that is continually growing, learning and assuming new roles in patient care; we want to ensure that our nurses are in optimal positions to deliver on the new expectations and demands of our evolving health care system.”

The fully online program can be completed in three full-time semesters. Students complete 10 courses over 12 months that will provide a foundation for excellence in professional nursing practice. This practice-related experience will assist students to integrate practice-related knowledge and skills that will transition them from an associate degree or diploma to the baccalaureate level of proficiency as students gain higher-level skills than those already accomplished in their RN program.

CON celebrates BSN cohort with new ceremony

Twelve years ago a CON nursing tradition was reborn. Before 2002, incoming baccalaureate nursing students were recognized through nursing’s traditional capping ceremony. Today, in lieu of receiving a nursing cap, the college recognizes the undergraduate students with a more modern welcoming gift, a stethoscope.

This year, the college enhanced this important ritual. In addition to receiving a stethoscope, the incoming BSN students were presented with a Humanism in Medicine lapel pin to wear on their first white lab coat. The gift of the pin symbolizes behaviors between nurses and their patients that is respectful and compassionate. It signifies attitudes that are sensitive to the values, autonomy, cultural, and ethnic backgrounds of others.

The MUSC College of Nursing was one of 100 nursing schools nationwide to receive a grant from the Arnold P. Gold Foundation (APGF) and the American Association of Colleges of Nursing (AACN) to support this activity. This Foundation has been supporting white coat ceremonies for colleges of medicine for years, but this year decided to include colleges of nursing as well in order to emphasize the commitment of incoming nursing students to provide compassionate care.
SEPTEMBER

**Student Activities & Volunteer Fair**
11:30 a.m. - 1 p.m. | MUSC Horseshoe & Portico
Featuring booths from MUSC student organizations, student services, and volunteer opportunities in the Charleston community.

**Staff Meeting**
10 a.m. | HOT (910)

**Lettie Pate Whitehead Scholarship Reception**
5:30 - 7:30 p.m. | Old Village Post House

**MUSC SGA Art Walk**
5 - 8 p.m. | French Quarter

**Faculty Workshop Rubrics**
9 a.m. - 4 p.m. | HOT (910)
Speaker: Michael Bridges, PhD

OCTOBER

**Student Blood Drive Challenge**
Noon - 4 p.m. | Wellness Center Gym

**MUSC Board of Trustees Meeting**
9:00 a.m. | Colcock Hall

**MUSC Presidential Inauguration**
2 p.m. | Installation Ceremony
4 p.m. | University-wide reception

**Staff Meeting**
9 a.m. | HOT (910)

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**CON RECOGNITION FUND**

FACULTY AND STAFF:
Please consider a contribution to the CON Recognition Fund.
Faculty: $50 | Staff: $25

These funds are used to send faculty and staff cards and flowers for births or bereavement, purchase retirement gifts, and to pay for parties and showers.

Only checks made out to ‘CON Recognition Fund’ can be accepted.
Place checks in an envelope in Shannon Hudson’s mailbox.
Thank you for your support!

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**HEALTH CARE HEROES**

The Charleston Regional Business Journal will honor people and organizations that have a passion for health care and a compassion for patients.

Nominations for Health Care Heroes are open until September 12 at 5:00 p.m.

Nominate by completing the online form.

Nominate today! Honor a nurse hero among us.
NCSBN releases results of national simulation study

BY TERESA ATZ, PHD, RN

Today’s health care environment continually challenges undergraduate nursing faculty to provide quality clinical experiences to their students in health care settings where patients are more acutely ill, have shorter hospital stays, and where there is stiff competition for clinical sites from other programs of nursing. A recent survey of nursing leaders revealed a readiness to practice gap between graduation and orientation of the new nurse in practice. Although 90 percent of nursing faculty feels their students are ready to practice, only 10 percent of nursing leaders who hire these new graduates agree.

In 2011, the National Council of State Boards of Nursing, or NCSBN, embarked on a landmark, national, multi-site simulation study with prelicensure nursing programs to address this readiness to practice gap. Phase 1 evaluated simulation use of all programs of nursing in the United States. Phase 2 of this study was a multi-site randomized control trial, longitudinal study to answer the following research question: Does substituting traditional clinical hours (no more than 10 percent simulation) with 25 percent and 50 percent simulation impact educational outcomes (knowledge, clinical competency, critical thinking, readiness for practice, NCLEX pass rates) assessed at the end of the undergraduate nursing program? Participating sites were given a standardized simulation program for all clinical courses.

Full results were released in the August issue of the Journal of Nursing Regulation, showing that up to 50 percent of simulation was effectively substituted for traditional clinical experience for all core courses across the prelicensure nursing curriculum. In addition, NCLEX pass rates were unaffected and all three groups were equally prepared for entry as a new graduate RN.

Phase 3 evaluated the translational outcomes into the workforce such as retention and clinical judgment. The study participants were followed for up to six months of clinical practice. The study found that there were no meaningful differences between the groups in critical thinking, clinical competency and overall readiness for practice as rated by managers at six weeks, three months and six months after working in a clinical position.

These results give undergraduate nursing faculty with access to simulation laboratories more flexibility and creativity with meeting the clinical needs of the students in this challenging clinical environment. The use of standardized simulation can also level the playing field for students as it provides all students with the same simulated clinical experiences.

Keep warm, show your support

The College of Nursing’s SGA/SNA is now selling sweatshirts. These Jerzees® sweatshirts are made of a 50 percent cotton and 50 percent polyester NuBlend® preshrunk fleece, and come with a stylish quarter zip collar. Sweatshirts are available in 10 different colors. The CON logo is located on the front left chest.

Sweatshirts are $30 and are available in adult sizes small - XXL.
Deadline to order is Oct. 10 and will be delivered as a group order on Oct. 20.

To order visit www.liveforcause.com

Contact Kenneth Gordon at gordok@musc.edu for details.

“...You are the most important person in this room. You are a nurse.
— Suzanne Geimer, RN, CEN, MICN, CN III
Funded grants

Gayenell S. Magwood, PhD, has received funds from the National Institute of Health/National Institute on Diabetes, Digestive and Kidney Diseases for her R34 application titled, “Novel intervention linking public housing and primary care to prevent diabetes.” The goal of this two-year planning project is to develop, implement, and evaluate a pilot translational, diabetes prevention program (DPP) intervention. It proposes to partner with the City of Charleston Housing Authority and the Fetter Health Care Network (FHCN), a federally qualified health center (FQHC) primary care network, to refine and pilot test a community-based, behavior focused DPP intervention to reduce obesity and diabetes risk in public housing residents who are already eligible for FHCN/FQHC services. This project will use a randomized wait list control design to allocate participants to a translational community based DPP intervention or FHCN/FQHC usual care.

Deborah Williamson, DHA, MSN, RN, CNM, has received funding for a third year from the Trident United Way for the continuation of Charleston PASOs, an organization that aims to improve access to health services for the tri-county Hispanic community. Through a collaboration with local health, social, and academic professionals, as well as Hispanic community members and leaders, Charleston PASOs will provide a coordinated support service that improves access to health care by diminishing or removing multiple barriers that prevent tri-county Hispanic families from being able to access necessary health and social services. Barriers addressed by PASOs include language differences; mistrust and fear; misinformation about where, how, and when to access services; low literacy; lack of health insurance; and cultural differences related to health care practices and systems navigation.

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**RESEARCH FOR LUNCH**
facilitated by Jane Zapka, ScD

Harborview Office Tower (304P) | Noon – 1 p.m.
Bring your own lunch

TUESDAY, SEPTEMBER 2
**Presenters: Drs. Gayenell Magwood, Mat Gregoski, Marvella Ford, & David Turner**
“Getting on Board with an Active Lifestyle to Reduce the Risk of Breast Cancer (GOAL)”

THURSDAY, SEPTEMBER 4
**Presenter: Dr. Janelle Wagner**
“eCOPE: Promoting Self-Management Coping Behaviors in Youth with Epilepsy and Their Caregivers”

FRIDAY, SEPTEMBER 5
**Presenter: Dr. Lynne Nemeth**
“A Virtual Learning Collaborative for Alcohol Screening, Brief Intervention and Treatment in Primary Care”

MONDAY, SEPTEMBER 8
**SPECIAL TIME: 1 - 2 P.M.**
**Presenters: Drs. Charlene Pope & James Roberts**
“Reducing Disparities in Interpreted Sick Child Visits: A RCT to Enhance Communication, Decision Making and Parent Understanding”

WEDNESDAY, SEPTEMBER 17
**Presenters: Dr. Ken Ruggiero**
“RCT Evaluation of Technology-Based Disaster Mental Health Interventions”

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Perry V. Halushka MUSC Research Day

NOVEMBER 13-14, 2014

MUSC Research Day 2014 is open to all students, postdocs, residents, fellows, and research specialists at MUSC and other institutions who have participated this past year in programs of research at MUSC. One abstract per presenter is allowed; team presentations are NOT allowed. The abstract deadline is Sep. 19 at 11:59 p.m. More information is posted on the [Research Day 2014 home page](#).

Questions? Contact Dr. Steven Kubalak at srday@musc.edu.

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**CON Newsfeed**

Stories we’re talking about

- Nurses who care the most burn out fastest
  - Melissa Dahl | New York Magazine

- Big box health care: Checkup for the price of a latte?
  - Bertha Coombs | NBC News

- SC adds 4000 registered nurses since 2009
  - Ashley Barker | SC Biz News

- Nurse practitioners are the future of health care
  - Laura Raines | The Atlanta Journal-Constitution
Mandated collaboration: Justification in a competitive health care market

BY AMY WILLIAMS, MSN, APRN, CPNP

Connecticut and Minnesota recently became the 18th and 19th states, respectively, to sign into law independent practice provision for Advanced Practice Registered Nurses (APRNs). Consistent to both pieces of legislation is the concept of mandated physician collaboration. In Connecticut APRNs must practice under a collaborative agreement for three years after graduation, whereas in Minnesota APRNs can practice independently after a year of collaboration.

In contrast to this concept, earlier this year the Federal Trade Commission (FTC) published its 53-page Policy Perspectives: Competition and the Regulation of Advanced Practice Nurses (2014) report, which examines the significance of APRN/physician collaborative agreements from a competitive health care market perspective. While discussing the full breadth of this document is beyond the intent of this brief column, there are six key points that underscore the futility of mandated physician collaboration for any duration.

Are collaboration and procompetitive collaborations beneficial to health care quality and costs?
Collaboration and coordination among health care providers are very beneficial. Indeed, improved collaboration and coordination among health care providers are fundamental goals of many current health care quality and cost containment initiatives. Antitrust law and policy recognize the potential for procompetitive provider collaborations, consistent with such initiatives. (p. 34)

Is collaboration common between APRNs and physicians who practice independently?
The majority of APRNs who work for institutional providers or physician practices regularly collaborate with physicians and other health care professionals. Even independent APRNs typically consult physicians and refer patients as appropriate, based on the APRN’s training, certification and experience. (p. 34)

Is collaboration common between APRNs and physicians and other providers?
Collaboration between APRNs and physicians is common in all states, including states that permit APRNs to practice independently. Every day, providers routinely communicate with one another, seek opinions and refer patients to one another. For example, a primary care physician often refers patients to specialists who, as a result of their education, training and experience, are better suited to address particular symptoms and conditions. (p. 34)

Is APRN practice safe and responsible?
State level APRN licensure and certifications requirements already demand safe and responsible practice, including collaboration and referral to meet patients’ needs. (p. 35)

If effective collaboration already occurs among APRNs, physicians and other providers, is supervision required?
Improved collaboration and coordination among health care providers is a fundamental goal of many health care quality and cost containment initiatives. Team based care in particular has been the focus of many private and public innovations in health care delivery. However, effective collaboration does not necessarily require that physicians formally supervise APRNs. (p. 35)

If collaboration is good for health care quality and costs; if collaboration among APRNs and physicians is common to include those who practice independently; if APRNs practice safely; and if less restrictive statutes existed, how would APRNs know when to collaborate?
Unless there are legitimate and substantiated health and safety justifications for mandatory physician supervision of APRNs, state legislators and regulators should carefully consider whether the goals of collaboration and coordination can be achieved via less restrictive alternatives. Under many circumstances, licensed APRNs can decide for themselves when their scope of practice requires or encourages collaboration with a physician—just as licensed physicians are trusted to decide when to collaborate with other physicians. (p. 35)

REFERENCE
Durham appointed interim director of MSN/DNP programs

Catherine Durham, DNP, APRN, FNP-C, has been appointed the interim director of the MSN/DNP program in the College of Nursing. Durham replaces Gigi Smith, PhD, APRN, who was recently promoted to associate dean for academics. Durham joined the faculty as an instructor in the DNP program in 2012. Since that time she has served as the lead faculty for the FNP/AGNP students and course coordinator for Advanced Care Management II and Advanced Clinical Assessment and Reasoning courses.

Durham maintains an active nurse practitioner practice and is one of the founding providers at Partners in HealthCare/East Cooper Outreach, a nurse practitioner practice that focuses on the management of uninsured patients with diabetes, hypertension, and associated conditions of hyperlipidemia, obesity, and tobacco usage. In addition, she serves as the sole NP providing cervical and breast cancer screenings in conjunction with Hollings Cancer Center Mobile Van.

Durham is a Commander in the US Navy Reserves. In that role, she works closely with the Department of the Navy Sexual Assault Prevention and Response office assessing sexual assault in the Reserve community.

Two faculty honored at faculty convocation

MUSC faculty members honored their own Aug. 19 during their annual convocation, the kickoff to the 2014-15 academic year.

CON’s Jane Zapka, ScD, research professor, was awarded the Peggy Schachte Research Mentor Award for 2014. This award is aimed at a faculty mentor or other colleague who is widely recognized as an outstanding research mentor who encourages and supports the advancement of others as successful, extramurally funded investigators.

In addition, four MUSC faculty members were honored for teaching excellence including Brian T. Conner, PhD, RN. Conner, director of undergraduate programs, was honored with the Educator-Mentor: Clinical-Professional award The purpose of these awards is to recognize members of the MUSC faculty who have made outstanding contributions to the university through teaching.

Prior to the awards portion of the program, faculty members heard from the new MUSC president, David Cole, MD, who gave the keynote address and discussed his vision for the future of the university. Click here to read his keynote address.

CON hires photographer, videographer

Josh Goodwin has joined the college as a multimedia content developer. In addition to photography and videography, he will also be working with the college’s IT team. Goodwin graduated from Winthrop University in 2012 with a bachelor’s degree in fine arts. He also is a graduate of the SC Governor’s School for the Arts and Humanities.

Faculty wins

This summer, Elaine Amella, PhD, RN, FAAN, functioned as a senior faculty member at the 2014 Hartford Geriatric Summer Nursing Research Institute at New York University from Jul. 28 through Aug. 1.

Teresa Atz, PhD, RN, presented “Addressing the transition to practice gap with simulation” at HealthCare Simulation South Carolina’s 3rd Annual Collaborative Partner Symposium in Charleston held Jul. 31 through Aug. 1.

Kathleen Cartmell, PhD, has been appointed as a member of the South Carolina Cancer Alliance’s (SCCA) coordinating council, the organization’s main oversight body. The SOCA is a statewide organization dedicated to reducing the impact of cancer on all people in SC.

Carolyn Jenkins, PrPH, APRN, FAAN, was featured in a story posted on the North Carolina Translational and Clinical Sciences Institute website titled, “MUSC and UNC-Chapel Hill test diabetes outreach program.”

Tina Lopez, PhD, was accepted to the Early Career Reviewer program through the Center for Scientific Review at the National Institute of Health.

Charlene Pope, PhD, RN, FAAN, attended the first convening of the VA’s Women’s Health Practice Based Research Network in Washington Jul. 30 through Aug. 2. As one of 37 site leaders, she was interviewed for a video on enhancing partnerships in research and care for women veterans.

In August, Amy Williams, MSN, APRN, completed child cognitive behavioral therapy training through Massachusetts General Hospital.

Deborah Williamson, DHA, RN, gave a presentation titled “Teen health leadership: A life changing initiative” at the National AHEC Annual meeting in Charlotte on Jul. 8.