

# UTAH NURSE

The Official Publication of the Utah Nurses Association

Quarterly publication distributed to approximately 38,000 RNs and LPNs in Utah.

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Musings of Caring

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[www.utnurse.org](http://www.utnurse.org)



The Utah Nurses Association recognizes the extraordinary, courageous and skilled efforts of all Utah nurses and other health care providers working to contain the Corona virus pandemic, to care for those afflicted and to save lives.

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## UNA BOARD OF DIRECTORS 2020 CALL FOR NOMINATIONS

The UNA Nominating Committee seeks nominations for the following positions to serve for the 2021-2023 term:

- President
- First Vice President
- Second Vice President\* (Off-cycle special election to replace incumbent who has resigned due to relocation)
- Treasurer
- Director-at-Large (2)
- Nominating Committee Member (1)

UNA Members may be nominated by other UNA members or self-nominate. Elected Board Officers serve a two-year term beginning in January 2021. Roles and responsibilities of each position are listed below. Most of the quarterly Board meetings are conducted virtually to facilitate full participation across the state.

If you are willing to serve, or would like to nominate another UNA member, please complete and submit the appropriate Consent to Serve/Biographical Information form located at [www.utnurse.org](http://www.utnurse.org) by **July 31, 2020** as instructed on the last page of the form.

**Important Dates in 2020 Election Cycle**  
**Wednesday, July 1 – Friday, July 31**  
Nomination Period

**Thursday, August 1**  
Announce Slate of Candidates for Election via email to all UNA members

**Wednesday, September 30**

UNA Annual Membership Assembly via Zoom teleconference at which time the Slate of Candidates is presented to membership and candidates may introduce themselves and speak

**Thursday, October 1 – Thursday, October 15**

Election balloting with same online Survey Monkey format as in prior years and paper option for those without computer access

**Monday, October 19**

Announce Election Results via email to all UNA members

**Thursday, January 14, 2021**

Board Retreat Dinner Meeting tentatively scheduled for 4:00 PM – 8:00 PM at the 6th Floor Conference Center, College of Law, University of Utah campus (may be converted to virtual meeting).

**UNA Board Positions Open for 2020 Election President**

1. Shall serve as Chairperson of the Membership Assembly, and Board of Directors at all scheduled meetings.

**UNA Board of Directors 2020 Call for Nominations continued on page 4**

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# FROM THE EDITOR

## Andrew Nydegger DNP RN CNE

The events of the past few months have pushed nurses into the forefront of the public eye. Battling COVID-19 day in and day out has been taxing and has pushed many nurses to their limits. Despite all that pressure and turbulence, you all proved to the world that nurses are unmatched heroes. I thank you all for the hard work and caring hearts you have shown. Many have even traveled out of state to fight the battle in the hardest hit communities. You have represented us well.



Utah nurses Katie Bates RN, Ashley Langford RN, A-Hui Fetzer RN, and Sarah Taylor RN all went to Mount Sinai Beth Israel Hospital with the AMI group helping during the height of the crisis in New York. James Stimson CRNA and program chair of the Nurse Anesthesia program at Westminster went to NYC to help out in a COVID-19 ICU. If you have been helping outside the state we would love to include your name and where you are helping out in the next issue. Please send your story to [uneditor@utnurse.org](mailto:uneditor@utnurse.org)



Utah Nurses at Mount Sinai Beth Israel Hospital in New York

## 2020 BOARD OF DIRECTORS

President	Sharon K. Dingman, DNP, MS, RN
First Vice President	Stacey Shelley, RN, MSN, MBA-HCM, NE-BC
Second Vice President	Andrew Nydegger, DNP, RN, CNE
Secretary	Peggy Anderson, DNP, MS, RN
Treasurer	Linda Hofmann, PhD, RN, NEA-BC, NE-BC
Director At Large	Angela Kaplar York, RN, BSN, C-AL Blaine Winters, DNP, ACNP-BC Claire L. Schupbach, BSN, RN, CPC

## STAFF MEMBERS

Executive Director	Liz Close, PhD, RN
Editor	Andrew Nydegger, DNP, RN, CNE

## COMMITTEE CHAIRS & LIAISONS

By-Laws	Liz Close, PhD, RN
Finance	Linda Hoffman, PhD, RN, NEA-BC, NE-BC
Government Relations	CJ Ewell, MS, APRN-BC Diane Forster Burke, MS, RN Kathleen Kaufman, MS, RN,
Membership	Anmy Mayfield, DNP, APRN, FNP-C
Nominating	Janelle Macintosh, PhD, RN
Education Committee	Blaine Winters, DNP, ACNP-BC

## UTAH NURSES FOUNDATION

President Jodi Waddoups, MSN-Ed, NPD-BC, RN-BC, CPPS

## ANA MEMBERSHIP

## ASSEMBLY REPRESENTATIVES

Aimee McLean, MSN, RN  
Sharon K. Dingman, DNP, MS, RN

## PRODUCTION

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Address editorial comments and inquiries to the following address:

Utah Nurses Association, Attn: Editorial Committee  
4505 S. Wasatch Blvd., Suite 330B  
Salt Lake City, UT 84124  
[office@utnurse.org](mailto:office@utnurse.org), 801-272-4510

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# Utah Nightingales – Utah’s First Honor Guard

Utah Nightingales is a Nursing Honor Guard to honor and recognize men and women who have dedicated their lives to the nursing profession. The Nursing Honor Guard pays tribute to individuals at the time of their death who dedicated their lives to helping others.

Active and retired nurses volunteer their time to travel the area and honor their fellow nurses. It is a privilege for the members of the Honor Guard to recognize nurses and help bring peace to mourners and family during their time of loss. Our volunteers serve any Registered Nurse, Licensed Practical Nurse, or Advanced Practiced Registered Nurse in the State of Utah.

The families choose what service will be performed by the Honor Guard but includes a group of at least three to six nurses dressed in the honor guard uniform. The uniform consists of the traditional white uniform, blue cape, and nurses cap. The honor guard can stand guard at the nurse's casket or simply provide a presence at the visitation. "A Nurse's Prayer" is recited at the funeral or during a special service and a Florence Nightingale nursing lamp is presented to the family. A white rose is placed on the nurse's casket or next to the urn at the end of the service, which signifies the nurse's devotion to his or her profession. The nurse is officially released from their duties at the end of the ceremony.

Utah Nightingales is being registered as a 501 C Non-profit organization. We are asking for a membership fee of \$20.00 to become a Utah



Nightingale. This fee will provide the oil lamp, white roses given to the family and pay for the website. The service we provide is free to the family. Our goal is to eventually sponsor a scholarship opportunity for a single parent trying to obtain their nursing degree.

For more information, please find us on our Facebook Page: Utah Nightingales. Our website is [www.utahnightingales.org](http://www.utahnightingales.org). Or you can email us at [utahnightingales@hotmail.com](mailto:utahnightingales@hotmail.com)

## PUBLICATION

The *Utah Nurse* Publication Schedule for 2020

**Issue Material Due to UNA Office**  
October, November, December, 2020, Edition - September 3, 2020

**Guidelines for Article Development**  
The UNA welcomes articles for publication. There is no payment for articles published in the *Utah Nurse*.

- Articles should be Microsoft Word using a 12 point font.
- Article length should not exceed five (5) pages  
8 x 11
- All references should be cited at the end of the article.
- Articles (if possible) should be submitted electronically.

Submissions should be sent to:  
[uneditor@utnurse.org](mailto:uneditor@utnurse.org) or  
Attn: Editorial Committee | Utah Nurses Association  
4505 S. Wasatch Blvd., Suite 330B  
Salt Lake City, UT 84124 | Phone: 801-272-4510

To submit a Letter to the Editor, include your name and contact information. (Due to sensitive issues the UNA can elect to publish anonymously.)

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# PRESIDENT'S MESSAGE

## Reflection and Direction in Unusual Times

Sharon K. Dingman, DNP, MS, RN



Our focus has been heightened as we provide our best care for patients and ourselves during a time of change and review of our ethical challenges, moral stressors, and team efforts of an entire health system in our state and nationally. Staying strong and focused during a pandemic, dealing with our own resilience, getting help when needed, and sometimes stepping outside of comfort zones to assess and provide care are daily challenges. We continue to share our ability to trouble shoot ways to deliver care, provide interventions for a variety of care delivery scenarios, and monitor patient care outcomes in an ethical and best practice manner.

In reflection and as mentioned in the "Musings of Caring" article in this edition, bees provide an example of working to achieve a goal as they help pollinate our flowers and in my home raspberry patch the bees are super busy now pollinating with a unified "hum" as it seems. Nothing seems to bother them as long as their work is not permanently interrupted. They continue with a tenacity lead by their goals. I ponder if this could be a metaphor for our organizational planning as we ease/move through the coronavirus pandemic and return to our "new normal" lives and ways of living in our communities this year and into 2021?

Above all care delivery activities to date, we can truly say, the year 2020 is filled with changes that will continue through the end of this year and into years to come. As we pause in reflection of 2020 Year of Recognition of Nurses, this has been a year of giving and a year of stories as we celebrate nurses all-year-long through the initiatives found on the Utah Nurses Association (UNA) Website ([www.utnurse.org](http://www.utnurse.org)) and American Nurses Association (ANA) Enterprise ([www.nursingworld.org](http://www.nursingworld.org)).

Up to date information to assist nurses and others informed on the actions and responses to the Coronavirus Disease (COVID-19) pandemic and national/local resources: UNA: [www.utnurse.org](http://www.utnurse.org) (see COVID-19 Resource Center)

ANA: <https://www.nursingworld.org/practice-policy/work-environment/health-safety/disaster-preparedness/coronavirus/>

We appreciate and support nurses and healthcare workers who are on the front lines and behind the scenes of patient care delivery during this global pandemic! "Thank You" for your dedication every day in the spheres of your work as nurses. Take Good Care!

### UNA Updates 2020

During the April 16, 2020 Virtual UNA Board Meeting our board members reviewed the four (4) Goals/Achievements for the Year 2020 selected at the January 25, 2020 UNA Board Meeting to guide UNA achievements as an organization. The board is unanimous in our direction and goals for UNA. The UNA Goals for 2020 are:

1. Initiate and influence legislations, governmental programs, local health policy and state health policy;
2. To promote leadership in local, state, regional and national nursing issues;
3. To provide services and maintain communication with members; and
4. To represent and speak for the nursing profession.

The 2020 goals for UNA include growing as leaders in nursing across many venues; to establish relationships with all nursing specialty organizations through collaboration and health care initiatives in Utah; to continue our participation as a healthcare consumers and advocate through legislation; promoting student nurse involvement in UNA through SNA; and public policy and activities of the UNA Government Relations Committee. Activities associated with these goals are included in this edition of the *UTAH NURSE*. Additional details may be found on the UNA Website.

UNA membership has increased this year! We welcome our new nurse members and offer thanks and appreciation to all of our members across the

continuum of care services, education, and in all venues where nurses are essential and valued for the uniqueness of their roles along with their combined goals in service to the public of individual people & families! Thanks to these teams of care givers who work everyday meeting the challenges of the delivery systems and to those who support their work from positions of support and care professionally and personally as a family member.

Some say we will return to our "new normal" over time. Nurses persevere! Their impact is identifiable including compassion, experience, recognition, accomplishments, innovations, ability to create and cultivate relationships, thoughtful strategies for growth and connection in our community/state, creative care in patient contact environments, and continuing to assist emerging collaboration with other health care providers. Visit ANA and UNA websites for details and how you may be of assistance in this transition.

### Year of the Nurse 2020 Update

To "Excel, Lead, and Motivate" are key to the success of this year of recognition for nurses spired on by global celebrations. The past months have been very challenging and we are adjusting to a new normal as we continue to prepare for the future outcomes associated with the Covid-19 pandemic experience. We are experiencing positive innovations that should continue after the pandemic ends. Now is a time for reflection on the resources that we have as nurses through membership and participation in UNA and ANA.

Many of you are and will continue to adjust to the new ways of care delivery learned during COVID-19. Nurses are good at creating environments of successful communication in patient care that meet the needs of patients, families, and in turn for themselves.

### Changes and Contingency Changes in Planning ANA Virtual Membership Assembly

The year 2020 has been a landmark year for ANA and UNA as we have held virtual meetings allowing the organization to continue doing business usually completed in person in a face to face modality. All aspects of our communication and endeavors in behalf of nursing and patient care have moved to virtual presentations. ANA proposed a contingency plan to allow an annual Membership Assembly to be conducted virtually and voting to occur remotely.

On Monday, June 1, 2020 the ANA Membership Assembly Voting Representatives participated in a virtual special meeting to adopt the proviso to hold the meeting and ANA national elections electronically. Please refer to the UNA and ANA websites for further information and outcomes.

President Ernest Grant, PhD, RN, FAAN, ANA President conducted the 2020 Virtual Special Membership Assembly Meeting where an amendment for the 2020 annual meeting of the Membership Assembly may be held by means other than in person, due to the national emergency caused by the COVID-19 outbreak; and the 2020 national elections may be held by remote voting, and the proviso would be binding for only the 2020 Membership Assembly. This amendment was accepted by a majority vote and approved to be held in compliance with statutory requirements. On June 1, 2020 the ANA Membership Assembly Voting Representatives participated in a virtual special meeting to adopt the proviso to hold the meeting and ANA national elections electronically.

On Wednesday, June 3, the ANA Dues Escalator Webinar was held with the State Association Presidents, Executive Directors, and the VPP Advisory Group Committee members hosted by Robin Schaeffer and Willa Fuller and others. Due to the Pandemic the March meeting was postponed. This educational presentation on process and options to be considered and recommendations for State Boards to prepare for the Membership Assembly vote was provided. Discussions included dues escalation at 1% (for ease of calculation and member communication) per year and implemented every five years (every five years at end of five year cycle), cost of doing business, review of policy for schedule of dues increase, and the process was again reviewed.

A deep dive study was performed and recommendations have been made to ANA and State Nursing Organizations. The total dues execution would be 5.1% at the end of the 2020-2024 Cycle. The last dues exculpation occurred in 2014 and next increase would be 2025. The 2020 Membership

Assembly will review the recommendation to be discussed further and approved. Results will be presented at the June 19, 2020 during the ANA Virtual Membership Assembly for vote and the update with recommendations for the states will subsequently be provided for the UNA membership. The vote will be taken on June 26, 2020 and will be found on the UNA Website.

Slides and recordings were made available to C/SNAs (Constituent/State Nurses Associations) and the Individual Member Division (IMD), and Organizational Affiliate (OA). ANA Membership Assembly Representatives and members of the ANA Board of Directors who were verified by June 5, 2020 were eligible voters. Results of the election will be announced to candidates on June 26, 2020 and the official announcement of the elections results will be made by ANA to the membership.

The ANA Nominations and Elections Committee prepared the slate of 2020 candidates for ANA's National Elections to be held and was conducted in accordance with the ANA Election Manual 2020 found at <https://www.nursingworld.org/~49b9fa/globalassets/ana/leadership--governance/ma/2020/manual-election-manual-for-2020-national-elections.pdf>

### ANA Membership Assembly Meeting Voting Process

Voting instructions for the elections of the Election for the Officers and Directors on the ANA Board of Directors, Members of the Nominations/Elections Committee and Dues Escalator Motion was provided during the Virtual Annual Membership Assembly Meeting. Results of the elections and ANA organizational decisions may be found on the ANA Website.

Results of the elections and ANA organizational decisions may be found on Voting instructions for the Election for the Officers and Directors on the ANA Board of Directors, Members of the Nominations/Elections Committee and Dues Escalator Motion was provided during the Virtual Annual Membership the ANA Website.

### ANA Annual Membership Assembly Virtual Meeting Summary/Outcomes

On Friday, June 19, 2020 the ANA Annual Membership Assembly Virtual Meeting was held. Details of the meeting outcomes will be available on the UNA and ANA websites.

### Conclusion

Thanks for your work and to an anonymous nurse colleague who has challenged all nurses "to think about and share a positive innovation that has come out of the COVID-19 pandemic experience that will impact care delivery after the pandemic ends."

In summary, embracing our duties and standing in the midst of those we work with to provide care each day is an opportunity to deliver skilled care to patients and families. We chose to do so as a nurse. We work in a noble profession supported by our knowledge, our skills, our caring, and our own sense of well-being. Our resilience brings us to work each day! We are supported by the inner peace we experience in our work along with our colleagues that is well done in behalf of patients and their families. Take Care of Yourselves and Thank You!

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**UNA Board of Directors 2020 Call for Nominations continued from page 1**

2. Shall attend standing Committee meetings or send a representative.
3. Shall have the responsibility and authority to conduct the business of UNA between Membership Assembly meetings.
4. Shall meet with the Executive Director or Office Manager as often as necessary to conduct UNA business.
5. Shall represent the association to other local, state and national organizations as appropriate.
6. Shall conduct new board member orientation.

**First Vice President**

1. Shall be a member of the Membership Assembly and the Board of Directors and shall attend all scheduled meetings.
2. Shall, in the absence of the President and current President-Elect, assume the authority and duties of the President.
3. Shall, in the absence of a current President-Elect, automatically succeed the President in the event that the President is unable to fulfill the elected term of office.
4. Shall accept assignment from the President.
5. Shall serve as a liaison to the Bylaws Committee and the Government Relations Committee.

**Second Vice President**

1. Shall be a member of the Membership Assembly and the Board of Directors, and shall attend all scheduled meetings.
2. Editor of the *Utah Nurse* quarterly paper unless another editor is appointed.
3. Shall accept assignment from the President.
4. Shall serve as a liaison to the Utah Nurses Foundation.
5. Shall serve as a liaison to the Membership Committee.

**Treasurer**

1. Shall be a member of the Membership Assembly and the Executive Committee and shall attend all scheduled meetings.
2. Shall chair the Finance Committee.
3. Shall oversee the financial affairs of UNA, present written and verbal financial reports to the House of Delegates and membership, and sign checks as needed.
4. Shall, in conjunction with the President, Executive Director and Finance Committee, prepare a budget for the upcoming fiscal year.
5. Shall accept assignment from the President.
6. Shall serve as a resource to the Continuing Education Committee.

**Director-At-Large (2)**

1. Assist a board member in rejuvenating one of our standing committees... not necessarily to be the chair of the committee, but to actively work to get that committee up and running.

2. Represent an area of nursing or an area of the state that is currently not heavily represented on the board.
3. Learn about the functions of the board and the UNA and thus become somewhat "polished" and perhaps ready to run for an officer's position.
4. Support the ongoing work and projects of the Board of Directors.

**Nominating Committee (1)**

The Nominating Committee is responsible for addressing issues regarding unfilled vacancies of any UNA elected position due to expiration of term, resignation and termination. This committee will also nominate individuals for UNA offices and for national offices within ANA. This committee will notify new board members of their job descriptions and send letters of congratulations to all new Board Members following an election. Specific guidelines for fulfilling these responsibilities are included in the UNA bylaws.

Please direct questions by email to [office@utnurse.org](mailto:office@utnurse.org) or leave a voicemail at (801) 272.4510.



The Utah Nurses Foundation (UNF) Board met on May 27, 2020, and passed the organization's Bylaws. Elections were held with the following officers elected:

President Jodi Waddoups  
 Vice President Susan Chase-Cantarini  
 Secretary-Treasurer Kristi VanDam

A heartfelt thank you to Marianne Craven who has served as UNF President for many years! She will continue as a member of the UNF Board.

**JOIN**  **UNA**  
 UTAH NURSES ASSOCIATION

**AND**  **ANA**  
 AMERICAN NURSES ASSOCIATION

Utah Nurses Association and ANA are empowering nurses with resources, programs and standards that help you advance your career and your profession.

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Join today at [www.utnurse.org](http://www.utnurse.org)!

Now is the perfect time for you to join ANA and Utah Nurses Association

[www.utnurse.org](http://www.utnurse.org)

# FROM THE MEMBERSHIP COMMITTEE

**Anmy T. Mayfield, DNP, APRN, FNP-C**

Welcome to our new members and renewing members. Please encourage your colleagues to join UNA this year (nursing students can join for free!)

The 2020 goals for the Membership Committee include the following: (1) Increase UNA member acquisition; (2) Provide services and maintain communication with members; and (3) Increase extent and quality of UNA relationships with professional nursing organizations in Utah.

Here is what we do: The UNA Membership Committee assists the Board and Executive Director (in alignment with ANA) in creating value for membership, nurse engagement, nurse excellence support, nurse health and well-being, and healthy work environments. The Membership Committee is responsible to recruit, retain, and increase Utah nurse awareness about the benefits of ANA/UNA membership and their active participation with the organization.

Along with increasing membership, we would like to “grow” our Membership Committee!

**We are seeking three (3) registered nurse members from different geographical areas in the state to join the UNA Membership Committee from inpatient/outpatient clinical care, education, and management. For questions about joining the Membership Committee, please contact:**

- Dr. Anmy Mayfield, UNA Membership Committee Chair, at [membership@utnurse.org](mailto:membership@utnurse.org)
- Dr. Liz Close, UNA Executive Director at [execdirector@utnurse.org](mailto:execdirector@utnurse.org)
- Contact the UNA Office at (801) 272-4510.



using a member log-in; E-News Letters: ANA SmartBrief, ANA Nurse CareerBrief, Nursing Insider, and Member News. You can also network and connect through social media with your state and national associations by visiting the UNA Website <http://www.utnurse.org>.

Please take a few minutes to review the current benefits of ANA/UNA Membership Information online.

Join or access through your MyANA account at <https://www.nursingworld.org>  
Visit Utah Nurses Association at: [www.utnurse.org](http://www.utnurse.org)

**IMPORTANT LINKS/CONTACTS AT-A-GLANCE**

- ANA Membership Services: 1-800-923-7709, FAX: 1-301-628-5355, Mail: American Nurses Association, 8515 Georgia Avenue, Suite 400, Silver Spring, MD 20910
  - o Update your Profile: <https://ebiz.nursingworld.org/Login/>
  - o ANA E-mail Address: Membership: [memberinfo@ana.org](mailto:memberinfo@ana.org)
- ANA-PAC: <https://ana.aristotle.com/SitePages/pac.aspx>
- Ethics Issues: <https://www.nursingworld.org/practice-policy/nursing-excellence/ethics/>
- Lobbying – Federal and State: <https://www.nursingworld.org/practice-policy/advocacy/federal/>

**Professional Development and Networking Resources Online:**

- ANA Careers Center: <https://www.nursingworld.org/education-events/career-center/>
- Navigate Nursing: <https://offers.wherenurseslearn.org/anamembers/>
- American Nurses Credentialing Center: <https://www.nursingworld.org/ancc/>
- For additional local information contact UNA via the website: [www.utnurse.org](http://www.utnurse.org) or send correspondence to Utah Nurse Association, 4505 S. Wasatch Blvd. Suite 330B, Salt Lake City, UT 84124.

**Membership Benefit Information Online**

Being a member of ANA/UNA makes a powerful statement about you and your commitment to nursing.

Membership provides a way for nurses across the United States and Utah to speak on behalf of nurses and patients for safe and consistent quality care. Continuing Education and member programs provide access to learning opportunities keeping nurses up-to-date on nursing knowledge and career advancement. Membership provides information about personal health and healthy work environments that are safe, empowering, and satisfying.

As a member, you have access to up-to-date journals and publications such as The American Nurse Journal; The Online Journal of Issues in Nursing (OJIN) by



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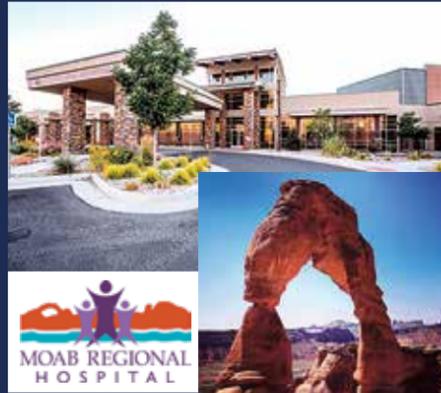
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# “MUSINGS OF CARING”

## Self-Reflective Moments From Nurses

Sharon K. Dingman, DNP, MS, RN

Sharing caring moments with one another is a powerful way to be part of the privilege we have as nurses in the care of patients and one another. Caring stories are moments in our personal and collective history as individuals. Collectively, musing of caring stories provide time for self-reflection and personal introspection as we teach, uplift, inform, guide, develop, and evaluate the care delivered to our patients and their families.

Connections with patients/families include aspects of respect, engagement, well-being which are measured by patient satisfaction and patient care outcomes. Self-reflection through caring shared with colleagues is known to be a major influence on our own well-being as nurses.

Our focus has been heightened as we provide our best care for patients and ourselves during a time of change and review of our ethical challenges, moral stressors, and team efforts of an entire health system in our state and nationally. Staying strong and focused during a pandemic, dealing with our own resilience and challenges, getting help when needed, sometimes stepping outside of comfort zones to assess and provide care, share our ability to trouble shoot, and provide interventions for a variety of care delivery scenarios and patient care outcomes in an ethical and best practice manner.

We are in a time of reflection and appreciation as nurses. The following “musing of caring” from one of our Board Members, Claire L. Schupbach, BSN, RN, CPC is an example:

*What extraordinary times we are living. I have witnessed and been part of things I never expected to during my lifetime, which I know to be true for each of you as well. All*

*of us witness people facing overwhelming challenges and multiple significant life-changing events, often at the same time. We also are fortunate to bear witness to extraordinary acts of giving, selflessness and sacrifice.*

*For me, the totality is too much; however, watching people in my circle weather this time focuses the scope of strength and love possible. Many nurses, including myself, work on the business side of paying healthcare claims. Since March I have witnessed nurses continuing to work, while teaching their children, taking cuts in pay and benefits (without a reduction in work), assuming full financial responsibility due to a partner's loss of income or health, sometimes while fighting illness themselves. Additionally, the usual family emergencies and illnesses have not abated and continue.*

*Dear to my heart is the daughter of a friend of mine, a nursing student, who used the opportunity to deliver food from a food bank, to people who are not able to get to a food bank. The nursing profession and the human condition are in good hands looking at the future.*

*When I can no longer absorb the global events, I focus on the acts of love, sacrifice and strength of those close to me. I am lifted. I am encouraged. I can take the next step.*

Thanks Claire for helping us to see the value and soul of nursing shared in this reflection by sharing your insights and observations of nurse during this pandemic are taken “one step at a time” and lift others in the process.

In conclusion, I want to share one of my favorite lessons on the value of our roles as nurses across various venues of health care delivery. This anonymous reflection has been an inspiration for my practice as a nurse from the bedside to the boardroom over time.

I have often referred to these **Five “Facts & Lessons From Geese”** as a way of being in health care delivery and as a guide for success as a nurse regardless of the venue in which care or service for another is delivered. Enjoy this opportunity for personal reflection and application of this metaphor:

**Fact 1:** As each goose flaps its wings, it creates uplift for the birds that follow. By flying in a V formation, the whole flock adds 71 percent greater flying range than if each bird flew alone.

– **Lesson 1:** People who share a common direction and sense of community can get where they are going quicker and easier because they are traveling on the thrust of one another.

**Fact 2:** When a goose falls out of formation, it suddenly feels the drag and resistance of flying alone. It quickly moves back into formation to take advantage of the lifting power of the bird immediately in front of it.

– **Lesson 2:** If we have as much sense as a goose, we stay in formation with those headed where we want to go. We are willing to accept their help and give our help to others.

**Fact 3:** When the lead geese tires, it rotates back into the formation, and another goose flies to the point position.



– **Lesson 3:** It pays to take turns doing the hard tasks and sharing leadership. As with geese, people are interdependent on each other's skills, capabilities, and unique arrangements of gifts, talents, or resources.

**Fact 4:** The geese flying in formation honk to encourage those up front to keep up their speed.

– **Lesson 4:** We need to make sure our honking is encouraging. In groups where there is encouragement, the production is much greater. The power of encouragement (to stand by one's heart or core values and encourage the heart and core of others) is the quality of honking we seek.

**Fact 5:** When a goose gets sick, wounded, or shot down, two geese drop out of formation and follow it down to help and protect it. They stay with it until it dies or is able to fly again. Then, they launch out with another formation or catch up with the flock.

– **Lesson 5:** If we have as much sense as geese, we will stand by each other in difficult times as well as when we are strong.

We can learn from geese how to truly be an example of the value of nursing to others and personally from the bedside to the boardroom.

In reflection, besides geese, some bees provide an example of working to achieve a goal as they help pollinate our flowers and in my home raspberry patch the bees are super busy now pollinating with a unified “hum” as it seems. Nothing seems to bother them as long as their work is not permanently interrupted. I ponder if this could be a metaphor for our organizational planning and delivery of care as we ease/move through the coronavirus pandemic and return to our “new normal” lives and ways of living in our communities this year and into 2021?

*Thank You for your caring service and encouragement each day for the patients, families, your nurse colleagues, and other professional care providers you encounter in your roles as nurses every day. Take Care Everyone!*

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# GRC REPORT

## **Diane Forster-Burke MS, RN & Kathleen Kaufman MS, RN**

We still intend to run the smoke free OR bill in spring 2021. We've contacted the president of the PA association to ask for their support. We've also followed up with a workforce consultant who is connected to the Utah Hospital Association. We've been asked to speak to the Board of Directors of the Utah Physicians for a Healthy Environment. This will be later in the summer. All legislative interim committees are being run virtually. Our smoke free OR bill most likely will not be discussed until Oct or Nov. So now is the time for all RNs in surgical areas to speak to administrators about the hazards of surgical smoke exposure. Make sure that the administration knows this is an issue and how it can be resolved.

The smoke free OR bill will be heard during interim study. Interim meetings thus far have been involved in budget decisions based on the lack of tax revenue as a result of COVID 19. We have not participated yet in these.

We have emailed Rep. Andrew Stoddard to see if he plans to run his bill again that would increase penalties for those who assault a healthcare worker on the job. We would like to gather data about this problem here in Utah for Rep. Stoddard. The UNA office will be sending out a brief survey. This bill was late being written (as many were) and the main opposition was from individuals worried about increasing criminal penalties on the mentally ill. We argued that not all assailants are mentally ill and we need some data to go further.

**Interim Session Information:** Due to precautions against spread of the COVID virus, there is no public access to interim meetings at the Capitol this year. However, all meetings are being streamed online and access to the agendas as well as public comment is possible. Directions on how to get involved in the interim session are found on the homepage of the Legislature at [le.utah.gov](http://le.utah.gov). The live link to this information is available by going to

the bright red banner at the top of the Legislature's homepage and clicking on the link directing you to public comment: <https://le.utah.gov/Documents/RemotePublicCommentGuidelines.pdf>

If you want to review hearing agendas and materials, go to the calendar and the meeting scheduled each month, HHS usually meets on the third week of the month. To prepare for each meeting you can subscribe to your committee of interest and receive notices of needed materials.

To subscribe, you can highlight the section indicated by the three bars just below the login button. Scroll down through a variety of choices to reach "committee", then scroll down to "Interim" and look down column for Interim Committees for 2020. Now scroll down to "Health and Human Services." Click there and you will see a new list starting with meeting, go down to the bottom of this list and you will find "Subscribe." Sign up for a personal subscription to the agenda and the hearing materials for each monthly meeting. You will get the notices in your email at the same time as do the legislators on the committee.

Alternatively, you can go to: <https://le.utah.gov/asp/lyris/subscribe.asp?Commit=INTHHS>

Read and prepare for each meeting. On the day of the hearing, you will be able to follow the meeting online and you may testify if you sign up to do so BEFORE 12 hours prior to the meeting. So check the HHS meeting on the calendar the day BEFORE the meeting. We will be following several different committees though most of the interim business regarding health policy will be discussed in the Interim Health and Human Services Committee, the committee will consist of both representatives and senators. If you cannot listen to the meeting at the time of the meeting, an audio recording is usually available about 24 hours after the meeting.

**Subjects or issues that the Health and Human Services Committee will be discussing in the Interim will be:**

### **COVID Related:**

1. Study of oversight of response and recovery, how to prepare for the future, and other COVID-19 issues that arise during the Interim.

### **Non COVID Related:**

2. Medical Cannabis: study implementation oversight and use of cannabis for pain management and study qualified medical providers.
3. Behavioral Health: study assisted outpatient treatment and other related issues.
4. Health Care Cost Containment: study prescription drugs and price transparency.
5. Professional licensing: study licensing for nursing and physicians.
6. Medicaid: study the implementation of eligibility expansion.

### **Two key subjects to be heard in Business and Labor:**

7. Surgical Smoke: study requiring surgical facilities to develop policies to evacuate surgical smoke.
8. Prescribed medical foods: study policies to establish authority of physicians to prescribe medical foods, require insurers to qualify medical food coverage for prescribed medical foods, and establish pharmacists authority to fill prescriptions for medical foods.

We strongly encourage you to listen in on the Interim meetings. This is where most work gets done on key health policy bills and you will learn a lot and be able to contribute with public comment as necessary. I appreciate the help of Mark Thomas, Chief of Staff in the Utah Senate for assisting me in the delineated logistics to subscribe. Join us for the Interim!

## Seeking Volunteer Vaccinators

### **CALLING ALL LICENSED RNs!**

The Salt Lake County Medical Reserve Corp is looking for volunteer vaccinators to help with the delivery of the COVID-19 vaccine later this year and into 2021.

*Be part of this historic public health effort and assist in protecting your community.*

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# COVID-19 Pandemic Impact on Utah Student Nurses

**Jessica Daynes**  
**President Utah Student Nurses Association**

As the president of the Utah Student Nurses Association (UTSNA), it's been interesting to see how students are adjusting to changes in this COVID-19 pandemic. Classes have been moved to an online format, and teachers quickly adjusted their teaching to online. Students who didn't know what Zoom was three months ago are now experts at utilizing this tool. The coronavirus pandemic has forced us to change our format, yet the nursing students of today are resilient in these efforts to continue learning

through the pandemic. Students still eagerly await announcements regarding Fall classes and whether they will resume online, face-to-face, or a combination of both.

Many nursing students miss having the clinical, hands-on exposure, which is so essential to becoming a nurse. At the time that schools converted to an online format, hospitals and facilities also restricted student clinical experiences in their facilities. With the lack of PPE and the risk for further exposure, it was the smarter decision for facilities at the time to limit access to students. Unfortunately, that's lessened the exposure students had to working with real patients and participating in actual procedures. Nursing schools and faculty are working hard to figure out how student nurses can have as much experience as possible through this pandemic.

While some students are lacking clinical exposure, some nursing students have some licensing allowing them to work through this pandemic. Currently, I've already seen nursing students making a difference in this COVID-19 world. The determination and courage I've seen from my peers who are working towards their registered nursing license is amazing. As an example, I have a friend currently managing a facility in which the coronavirus has been present. As she needed to, this friend rearranged schedules, collaborated with others effectively, and took on extra hours to make sure patients still received the best care possible. Nursing students are taking after our mentors in being creative and innovative, and it's amazing to see what we have been doing to make a difference.

Something that nursing students may be missing is the socialization that comes with nursing school. As a nursing student myself, I can say it was hard for everything to come to an abrupt stop. At one point I saw members of my nursing cohort five to six days of the week, and suddenly that stopped. Because of this abrupt stop in seeing each other, many nursing students have missed the comradery that comes with attending nursing school face-to-face. However, nursing students are resilient and make the most of this time. I know that some nursing students utilize facetime, phone calls, Zoom calls, and other methods to check in with one another and hang out virtually. Students are encouraged to reach out to their peers and check in on them to continue their social aspect of life, which is important to maintaining a balanced, healthy life.

Additionally, the Utah Student Nurses Association has noticed some of the hardships that come with living through a pandemic, so as the UTSNA board,



**BYU SNA Board misses being able to meet in person**

we're discussing ways to help nursing students through this time. One solution we've come up with is a Student Wellness Campaign through social media. We post different challenges on social media and have awarded nursing students with small prizes. Some of our challenges have included expressing gratitude, sharing relaxation and de-stressing techniques, and sending in humorous content because sometimes, laughter is the best medicine.

As nursing students make their way through these unprecedented times, we continue to take one step at a time towards our careers. Resources are available to nursing students to help them develop skills and continue their learning. They can do this by joining the Student Nurses Association (SNA), and with that comes eligibility to join the Utah Nurses Association (UNA) and American Nurses Association (ANA) for free! Through these organizations, there are opportunities to network, gain skills outside of physical nursing skills, and get involved in leadership. UNA and ANA webinars and resources are provided to student subscribers, and COVID-19 informational webinars that have been coming out to help nurses and students. These webinars address current issues in this coronavirus pandemic and it addresses common questions of nurses. Resources such as this are provided we can be up to date and involved! Once a student graduates, they can continue their membership in the UNA and ANA by paying for a yearly membership. More information can be found on the UNA website at <https://una.nursingnetwork.com/>.

As nursing students, we have learned so much through this experience, yet we hope that things will be able to resume to "normal life" sooner than later. The pandemic is difficult to live through, but the nursing students of today are flexible, hard-working, and among some of the most strong-willed to continue their nursing education through a time like this.



In 2010, the Institute of Medicine released a landmark report, *The Future of Nursing: Leading Change, Advancing Health*, which recommended increasing the number of nurse leaders in pivotal decision-making roles on boards and commissions that work to improve the health of everyone in America. The Nurses on Boards Coalition (NOBC) was created in response to this, as a way to help recruit and engage nurses to step into leadership roles.

The NOBC represents nursing and other organizations working to build healthier communities in America by increasing nurses' presence on corporate, health-related, and other boards, panels, and commissions. The coalition's goal is to help ensure that at least 10,000 nurses are on boards by 2020, as well as raise awareness that all boards would benefit from the unique perspective of nurses to achieve the goals of improved health in the United States.

We encourage each and every one of you, over three million strong, to visit [www.nursesonboardscoalition.org](http://www.nursesonboardscoalition.org), sign up to be counted if you are on a board and read more about the efforts being made to help build the future of our profession.



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# SPOTLIGHT ON NURSES

## Amy Squier, RN

McKay-Dee Hospital, Infection Preventionist

"The character of the nurse is as important as the knowledge she possesses," is a quote by journalist Carolyn Jarvis that captures the essence of the McKay-Dee Hospital Nurse and Infection Preventionist, Amy Squier. Amy plays a critical role guiding and coaching infection prevention practices at the hospital. She influences processes and champions key messages to keep caregivers, providers, patients and families safe, while providing both routine care and managing a pandemic. She is a safety champion who inspires caregivers to play an active role in finding solutions.

Amy's sincerity and calm approach while sharing the most finite and potentially challenging details for keeping people safe is truly unprecedented. "Holding the line" takes true courage and a willingness to be vulnerable, especially when there is potential for harm. Amy has yet to shy away from such a challenge, which is not always easy. Her knowledge and expertise are ever present while she respectfully and humbly discusses concerns with her peers. She puts people on an equal playing field. When common ground is found, caregivers become available to hear even the most difficult messages, simply due to her approach and finesse.

It's an honor to celebrate Amy Squier and her contributions to patient care at McKay-Dee Hospital. May she continue to inspire and influence our path.



Amy Squier, RN

## Matt Bentley, MSN, RN

Nightingale College Faculty

Submitted by Shandee Nelson

Nightingale College is pleased to spotlight Matt Bentley, MSN, RN from Cache Valley, Utah. Matt has worked as an LPN for 14 years in occupational health, 10 years as an RN at an acute care hospital and completed his Master's in Nursing Education in 2018. His medical background also includes Army medicine and EMS work including acute care burn units. When asking his learners about what they like about Matt one learner said, "Matt is easy going and jokes when appropriate but is also serious when needs to be. I like that he is not afraid to tell us how it is, situations that we may encounter, and how that is reality. I appreciate that he expands on topics if we ask questions and that he adds in extra educational information. He is knowledgeable and wants the best for us and from us! I am grateful he is one of our instructors!"



Matt Bentley, MSN, RN

# A Voice for Nursing

UNA leaders represent your interests in a wide variety of meetings, coalitions, conferences and work groups throughout the year, anticipating and responding to the issues the membership has identified as priorities. *In addition to many meetings with legislators, regulators, policy makers and leaders of other health care and nursing organizations, the following is a partial list of the many places and meetings where you were represented during the past three months...*

- Utah State Board of Nursing Meetings- Virtual
- Dr. Liz Close represented UNA on KSL News 04/01/2020
- Dr. Liz Close represented the UNA on Fox13 morning news 6/12/2020
- ANA Health Policy/GOVA/CSNA Bi-monthly Conference Call
- Academic Leadership Council of UON
- Utah Senate Legislative Meetings - Virtual



Dean Jane H. Lassetter, PhD, RN, FAAN

## Extraordinary times call for extraordinary leaders!

Dr. Jane Hansen Lassetter (AS '81, BS '98, MS '01) has been named the new dean of the College of Nursing at Brigham Young University and begins her five-year term in July. She is the president of the Western Institute of Nursing, a fellow in the American Academy of Nursing, and the past president of the International Family Nursing Association. Her research interests include obesity prevention in Native Hawaiian and Pacific Islander families and in children of all ethnicities.

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# HONOR THE NURSE

## Evolution of Nursing Education in Utah

**Kathleen Kaufman MS, RN**

Many things have influenced the education of nurses in Utah, not the least of which is the inner drive of each would-be nurse to take care or improve the care of the ill and infirm.

This is a brief and not necessarily all-inclusive review of the various approaches that have been used to develop an adequate workforce of nurses to serve the citizens of Utah. If a reader has additional information or a local school or hospital that I have omitted, please contact me at my email address: [kathleenkaufmanuna@gmail.com](mailto:kathleenkaufmanuna@gmail.com)

In this article I address the movement of nursing education beyond the hospitals to academic settings. I will focus on the eight public and two long-term private schools in the state. As Utah's population has grown, multiple new proprietary or private schools have come to Utah. They are not discussed in what is already a long article.

### We begin in the late 1800s:

Early nurses in Utah learned their work as apprentices in small hospitals and even in private homes of physicians. These women had few, if any, lectures and learned by doing many long hours of bedside care. They served their local communities faithfully and to the best of their native abilities. A few small hospitals started nursing programs for their own staffing needs.

The earliest formal hospital in Utah was St. Mark's Hospital, a six-bed facility established in 1872 by the Episcopal Diocese of Utah and largely funded by miner's subscriptions. This hospital provided care beyond that available in the mining camps or communities. The hospital gradually expanded and needed a source of nurses to provide care. In 1894, this hospital opened the first ongoing official school of nursing in the Intermountain Region: St. Mark's Hospital School of Nursing.

This two-year education eventually became three years and provided students experience in every department in the hospital beginning with the diet kitchen. Students did have regular lectures by physicians or senior nurses and spent many hours on the wards or in specialty units such as the OR. They typically worked 12 hour shifts (both days and nights) with two afternoons off each week for recreation or worship. After many years the successful diploma program was phased out as nursing education entered the academic world with the opening of the St. Mark's Hospital School of Nursing affiliated with Westminster College. Today Westminster graduates baccalaureate students, RN to BS students and graduate students in a variety of APRN specialties.

Shortly after St. Mark's opened, Holy Cross Hospital was established by the Sisters of the Holy Cross upon the invitation of Bishop Scanlan and the Catholic Diocese of Utah in 1875. Similar to St. Mark's school, the Holy Cross School of Nursing succeeded as a diploma program for nearly 30 years (1901-1973), actually affiliating with the College of St. Mary's of the Wasatch in 1931. During its over 72 years, this school graduated 1,056 nurses. In 1994, this hospital was ultimately sold by the sisters to a secular, for-profit private organization and the hospital has changed hands twice more. Today it is known as Salt Lake Regional Medical Center administered by Stewart Health Care. Holy Cross sisters have gone on to create Holy Cross Ministries where the sisters work on outreach, immigration, and social work throughout Utah.

A possibly forgotten hospital, the Deseret Hospital, was established in 1882 by a group of women medical doctors with the support of the Relief society and the First Presidency. This hospital served many of the destitute population and focused on nursing care and obstetrics. Dr. Ellis R. Shipp conducted classes in nursing and midwifery for young women during the course of this hospital and continued after the hospital closed. Despite ongoing support by the founding agencies, the hospital was forced to close due to a lack of sufficient operating funds and the high free patient load.

### Early 20th Century

LDS Hospital opened in 1905. Shortly after opening, this hospital could not fill its need for nurses from graduates of the St. Mark's Hospital and Holy Cross Hospital training schools so that LDS Hospital opened its own school: the W.S. Groves Hospital

Training School for Nurses. This school would grow and persist until its last class in 1955.

Other hospitals in the early 20th century included Provo General Hospital which held nursing classes in Utah County and graduated 44 nurses over 21 years of existence. The matron of the Provo Hospital nursing program was Zina Johnson who graduated from the Keogh-Wright Hospital in Salt Lake City. She was a natural and dedicated leader. She was assigned by the governor to chair the first state nursing board as Utah prepared to enact its first registration laws in 1917. Due to Johnson's frequent state meetings, the doctors and owners of the Provo General hired Carol Bayles, a 1912 graduate, as an assistant superintendent of nursing to help with the workload. Unlike other hospitals, the doctors who owned the hospital required staff doctors and the superintendent nurse to attend at least one major conference each year. New ideas from these opportunities kept the elevated standards of Provo General Hospital school.

Another example of early training programs is the Utah-Idaho Hospital center (later William Budge Memorial Hospital) which taught nursing classes in Logan. Many smaller hospitals existed, but not all taught nursing.

### Mid-20th Century

In the mid-20th century, larger hospitals developed to meet needs of a growing population – all of these gradually established rigorous three year curriculums for student nurses who provided the bulk of unpaid nursing services to the hospitals. These hospitals included: Cedar City Hospital, Holy Cross Hospital, LDS Hospital, St. Mark's Hospital, and McKay-Dee and St. Benedict's Hospitals in Ogden (which merged and ultimately became Ogden Regional Hospital), and Salt Lake City General Hospital (now University of Utah Health Sciences Center.)

Education in these early diploma programs focused the nurse's learning on the client population of each hospital. This focus sometimes limited future job opportunities for the student nurses to primarily direct bedside care in one area of specialty. This would be especially true for any students who primarily trained in a maternity or psychiatric setting. Once graduated from most hospital programs, the nurses might be hired by the hospital of their school as a supervisor though many were not hired because the hospital came to depend on student nurses, not graduate nurses, to do most in-hospital. This saved money for the hospital whose only costs for students was their room and board; usually the student had to purchase their uniforms, books and tools without help from their school/hospital.

Many graduate nurses signed up on a community registry to be hired as private duty nurses. A few nurses were occasionally hired to work as public health nurses in the community and in schools. Essentially all nurses in Utah were women until after WWII although at least one man did graduate from St. Mark's Hospital School in the late 1800s.

### WWII and the Cadet Nurses Corps

With the outbreak of WWII, too few nurses were available across the country for the war effort. This led to the passage of the Bolton Act and the establishment of the Cadet Nurse Corps. Hospital nursing programs rose to meet the demand, but the federal regulations governing the Cadet Corps required the hospital schools to be affiliated with a college or university for a broader baccalaureate education. These regulations ultimately moved much of nursing education into academic settings in the decades to come.

The Cadet Corps provided a chance for women to serve their country and many thousands applied. (Over 170,000 nurses graduated through the Cadet Nurses Corps.) The Corps provided room and board, uniforms (summer and winter), books and a small monthly stipend to each student. This was at no cost to the students provided that they serve in a needed capacity in either military or civilian settings for two years after graduation. This program actually provided an opportunity for many women to get an education they otherwise could not afford.

One proud graduate of the Cadet Corp program was Evelyn Jorgensen. Jorgensen graduated from the William S. Groves School of Nursing at LDS Hospital and completed required courses for the Corps at the U of U. She served for many years as



**Holy Cross Hospital at Opening**

a supervisor at the hospital before going on to earn her MS at BYU. She then worked at LDS Hospital as clinical faculty for BYU. Jorgensen's great interest in the history of nursing led her to become an eminent nurse historian in Utah. She authored or co-authored The History of the William S. Groves School of Nursing, the History of the UNA, and the centennial history of LDS Hospital, Celebrating the first 100 Years of LDSH, among other shorter works.

Many hospital programs evolved into the nursing education programs we know today; Cedar City Hospital became Southern Utah University College of Nursing (SUU). SUU draws students from central and eastern Utah and sends graduates back to work in their community hospitals. Two graduates of Southern Utah University School of Nursing have provided administrative nursing leadership in rural communities. Kent Turek is the chief nursing officer at Blue Mountain Hospital in Blanding while Ches Jacobson is chief nursing officer at Delta Community Hospital.

St. Benedict's Hospital and McKay-Dee Hospital combined to become Ogden Regional Hospital and the diploma programs of this hospital laid the foundation of Weber State University's first practical nurse program. "In 1953, Weber State College (now WSU), located in downtown Ogden, was selected to host one of the seven pilot Montag ADN programs. The WSU nursing program subsequently had the opportunity to serve as the 1971 Utah Board of Regents designated provider of ADN Nursing Education in the State System of Higher Education. As a result of this mandate, associate's degree nursing programs have been offered by WSU at cooperative campuses located throughout the state. Programs were offered at Utah State University in Logan, Salt Lake Community College (SLCC) in Salt Lake City, Southern Utah University (SUU) in Cedar City, and Dixie State College in St. George. One of these campuses, Utah State University, continues to have a cooperative nursing program with WSU, while SLCC, SUU and Dixie State College have been approved by the Board of Regents to offer their own nursing programs." WSU continues to work with Bridgerland Technical College, Dixie Technical College and Ogden Technical College to give a seamless admission of their PNs to the WSU RN program and then to the WSU RN to BSN program. "This is

advantageous for the students and also helps with the greater need for the BSN level RN.” (Susan Thornock).

USU does continue to conduct practical nursing programs at various towns throughout the state including USU East in Price, and Uintah Basin Technical College in Roosevelt.

“In continuing fulfillment of this early mandate, WSU nursing outreach programs continued to be offered throughout Utah’s rural communities, including Tooele, Richfield, Roosevelt/Vernal, Payson, Price, Delta and Panguitch” ([www.weber.edu/Nursing](http://www.weber.edu/Nursing)). Over time WSU developed an BSN program in 1987 and offered a MSN program in 2008 with FNP and DNP programs in recent years.

Shelby Pitts is one of many notable graduates: she is one of WSU’s first graduates from the Family Nurse Practitioner program and is presently in practice at Ogden Clinic in Ogden Utah.

Tammy Richards graduated from WSU BSN program some years back as an outstanding and motivated student. She is presently the Assistant Vice President, Professional Practice and Learning at Intermountain Healthcare, Clinical Operations, Central Office.

#### Private Nursing Schools in Higher Education Settings

Two private nursing schools arose from early Salt Lake Hospitals. Wm. S. Groves School of Nursing at LDSH became BYU School of Nursing in 1952. This school now offers BSN and MSN (Family Nurse Practitioner) programs. A major simulation lab has enhanced the undergraduate and graduate programs. This school has had a long history of an international focus on nursing. Many study abroad opportunities were made available in places such as Cambodia, India, Taiwan, the Czech Republic, Finland, Russia, and Ecuador. A recent endowment for Public and Global health will enhance these programs.

Students of BYU work with faculty member Kent Blad to accompany veterans on Honor Flights back to Washington, DC

Some outstanding graduates from BYU include Alison Wright who earned her BS and MSN at BYU. Alison works as an FNP at the 4th Street Clinic in downtown Salt Lake City. Kelly Wosnick also earned her BS and MSN at BYU and has established Bristol Help in Orem which offers integrated physical and mental health care. She works with a dozen other NPs in this much needed clinic. Marie Prothero earned her MSN at BYU and completed her PhD at the U of U. She has worked in nursing education at Shriners’ Hospital and is currently the executive director of Pat Care Services at Shriners’ where she is an great advocate for patient safety and patient rights.

BYU will welcome a new Dean on July 1st of 2020, Jane Lassiter is a well-rounded graduate of BYU where she has earned her ADN, BSN, AND her MSN. Welcome Dean Lassiter!

Westminster College of Nursing arose from the St. Mark’s Hospital School of Nursing. This school initially did all clinicals at St. Mark’s Hospital, but more recently has placed students in many other clinical facilities. There is a strong undergraduate emphasis on public health and policy which will provide some of the expertise much needed in the post-COVID world. Several graduates have stood out among the BSN, MSN, and DNP classes:

An outstanding graduate of Westminster College is Kristy Cottrell who is a stalwart leader in public health nursing in the Salt Lake Valley, now serving as the Deputy Director of Senior Services in Davis County (an Area Aging Agency or AAA). In this role she “Develops networks between the AAA, healthcare, and private enterprise, improving the community and choices for older adults to remain independent. She also participates in strategic planning, public health accreditation, policy formation, and service provision.” ([www.linkedin.com](http://www.linkedin.com)).

Other prominent graduates of Westminster include: Julie Balk DNP, graduated from Westminster with her BS and furthered her education at the U where she became a nurse practitioner and then obtained her DNP. She has been very active in education of APRNs, being the director of the U’s NP program and later the DNP programs at both the U and Westminster.

Chris Chytraus discovered that there was no comprehensive grief support program in Salt Lake for children who had experienced a great loss as her two young children had when her husband died. Chytraus went to Seattle for extensive training and came back to found the Sharing Place, a grief center for children. This is a tremendous gift to the entire Salt Lake Valley community.

Lynn Hollister MS RN was a noted and esteemed undergraduate faculty at the University Of Utah College Of Nursing for much of her career. She earned her BS at Westminster and went on to earn an MSN in teaching at the U. She was director of the

U’s very active CE program for seven years. Hollister is now Emeritus faculty at the U.

#### Origins of the University of Utah College of Nursing

Salt Lake General’s program became the University Of Utah College Of Nursing (U of U). This nursing program began in 1948, moved with the hospital to become part of the University of Utah Medical Center (now the U of U Health Sciences Center) in 1965. Two innovative programs developed subsequently: the psychiatric nurse practitioner specialty and the midwifery program. Both the psychiatric and basic nurse practitioner programs were relatively new concepts at the time. The midwifery program was the first nurse-midwifery program west of the Mississippi River. Today the College of Nursing offers BSN, MSN, and DNP in various specialties as well as a strong PhD program where many future researchers and faculty develop. This college was the forerunner of distance education in nursing in Utah as well as a leader in development of nursing informatics. The college’s close association with the interdisciplinary Gerontology Program offers students opportunities to earn various certificates in this field.

The University of Utah’s College of Nursing has had many recent outstanding leaders from among it’s graduates. Amy Hartman MS RN work has focused on the provision of care for patients and families in home care and hospice. Hartman’s work as a nurse entrepreneur on behalf of those suffering from dementia and their family members has earned her recognition as the University Of Utah College Of Nursing’s first Young Alumni Award winner. Her practice and business is Solstice in Sugarhouse. “Her decision in opening this enterprise, she says, was about providing high-quality, community-based care and empowering her nurses and doctors to ‘do things as they were meant to be done.’”([nursing.utah.edu/blog/2017](http://nursing.utah.edu/blog/2017))

Danielle Pendergrass, DNP, APRN, WHNP-BC who practices in Price, has become a leader in innovative integrated physical and mental health care for women in rural eastern Utah. She practices in Price and has been instrumental in removing practice and payment barriers to allow all Nurse Practitioners to directly bill and be reimbursed by Medicaid in the state of Utah. Pendergrass has negotiated equal pay for equal services and raised the payment from 75% the physician rate to 100% the physician rate for all Nurse Practitioners in the state of Utah. She currently is engaged in a Robert Wood Johnson leadership project. A graduate of the U of Utah, she has recently been awarded the Breakthrough Leader in Nursing Award by the Future of Nursing: Campaign for Action, a joint initiative of AARP and the Robert Wood Johnson Foundation for her innovative work in increasing quality health care for rural Utah’s women. (Pendergrass, CV 2019)

#### Utah Valley University Program

Provo General and Aird Hospitals in Utah County became the basis of the Utah Valley University nursing program. These hospitals fed into the early LPN program at Utah Technical College at Provo in 1939. The demand for additional LPNs in the ‘30s and later, in the post-war years, was enough to warrant continuation of this program until 1989. In 1989, an ADN program was started and in the late 1990s that program developed into the RN to BS program of today. Utah Tech became Utah Community College and then Utah Valley State College before it grew to become Utah Valley University. According to Dean Marianne Craven, the goal of UVU’s College of Nursing is to produce excellent direct care (bedside care) nurses who have strong assessment skills and superior interpersonal communication skills. They must be able to recognize changes in their patients and know how to address those changes. (Marianne Craven, personal communication.)

#### Distance as a Challenge to Nursing Education

The vast distances in Utah provide barriers to education for rural residents. In the past, young women essentially moved from their homes to the hospital training programs in big cities. A fine display of young graduate nurses hangs in the Helper Railroad and Mining Museum. These 40 local women traveled to Salt Lake City in the mid-century to earn their nursing diplomas at Holy Cross Hospital and LDS Hospital. They then returned home to Carbon County area to practice nursing in their home communities.

Today rural residents often become certified as CNAs in their local high school or hospital, and then earn their LPN degree at one of several technical schools associated with Utah State University. After this program, they may still need to travel to a centrally located nursing program. Many southeastern students attend SUU for their ADN and then, after

passing the licensing exam, they can work as a registered nurse in their home communities. Hopefully many of these students do elect to go home to work since there is always a nursing shortage in rural hospitals and clinics. Today, several RN to BS programs exist in Utah where RNs can complete their BS online.

Snow College has a different origin than most schools; it began as a church school supported by the Church of Jesus Christ of Latter Day Saints. Snow is located in Ephraim with many classes held in both Ephraim and Richfield. The Richfield campus was part of Sevier Valley Technical Center and came together with the Snow campus using guidance from Weber State.

Today Snow College has a one plus one program with many students attending classes over television while sitting in Richfield, Ephraim and even a few in Nephi. Once the students earn a practical nursing degree, they are accepted into the registered nurse program. Approximately 50 students learn nursing at this institution. Those who earn an ADN with one year of work beyond the LPN class can now go online to earn a BSN in their own communities instead of the travel in earlier days. There is a notable number of nontraditional students who come to Snow from earlier careers. (Amber Epling)

These nursing programs have all contributed nurses who would move into leadership roles in both their home communities and also in statewide positions, some quite distant from the bedside and clinic. We have noted some already, and there are more.

#### Nurses Rewrite the Utah Nurse Practice Act in 1992

In the 1990s, two nurses rose to the challenge of rewriting the Utah Nurse Practice Act. Paula Julander came to Utah from Georgia with a hospital school of nursing diploma. She graduated with a BSN from the U of U and subsequently earned her MSN at BYU. Laura Poe earned her LPN at SLCC, and both her BS and her MSN at BYU. These two women were the powers behind much work by many nurses to rewrite the Nurse Practice Act in 1992. Julander hosted the committee work at the UNA office where Laura Poe served as executive director. Julander ultimately served as President and then Executive Director of the UNA. This was before she went on to serve as a Utah State Representative and then State Senator. Laura Poe was the Bureau Manager for Nursing in DOPL. She put much effort into clarifying the roles of APRNs in Utah and, ultimately, she authored the first Nurse License Interstate Compact Act. Poe served as the Bureau Manager for Nursing in DOPL for 17 years, faithfully presenting and protecting Utah’s nurses, nursing education and the public in her capacity.

#### The Cost of Nursing Education

As all nurses know, nursing education is very expensive in terms of funds, and also in terms of necessary clinical faculty and clinical sites. A long collaboration between clinical agencies and schools has tried to address this issue. Finally, in 2018, the appropriations from the State Legislature have been dispersed to seven of the eight public nursing programs as a result of the successful consortium of all eight public schools with nursing programs in higher education. Teresa Garrett, MS, DNP, PHMABC, a Robert Wood Johnson fellow in health policy, was a graduate of the U of U, and she served as the Director of the Nursing Consortium drive to more adequately fund the schools and increase the number of slots in the schools by a total of 200. This multiple year effort resulted in \$2.3 million dollars of ongoing funding and will lead to increased faculty for clinical education as well as an increase in the number of nurses in this time of nurse shortages. An on-going coordination between nursing programs and clinical agencies should lead to adequate clinical sites in combination with simulation exercises.

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