



# NURSING NEWS

SPRING 2014 I DEPARTMENT OF NURSING NEWSLETTER

#### VIEW FROM THE CHAIR: A FOND FAREWELL

By Carolyn L. Kreamer, Ph.D., R.N., CNE



Carolyn L. Kreamer, Ph.D., R.N., CNE Professor of Nursing, and chairperson, Dept. of Nursing

"For everything there is a season and a time for every matter under heaven..."
Ecclesiastes 3:1, NRSV

#### THIS IS MY LAST ENTRY

in our Nursing News as chairperson of the Department of Nursing. It is my time to leave this wonderful position

and transition to the world of retirement. I can scarcely believe this is my 28th year at Messiah College and my 15th year as chairperson. What an amazing

journey! I cannot begin to recount all the blessings I experienced while a part of this educational program. I am enriched by many outstanding faculty colleagues both nursing and others—who taught me so much about nursing, teaching and Christian life. I recall many, many incredible students whose talents, courage and commitment amazed me—and continue to do so. I reflect on the many crises and stressors that we shared in common, and how God provided just what we all needed at just the right time and in just the right way. His presence and blessings surround this educational endeavor now and into the future. I leave knowing that the nursing

program will grow wings and soar. I look forward to witnessing that flight from a new perspective. And, I will nod and smile.

As I reminisce—one of those critical tasks at my stage of life according to Erikson—I look forward with anticipation to learning new things, meeting new people and savoring the gifts of the past. Nursing provided me with a rich and varied life that I could never have anticipated when I began my professional journey 45 years ago. Wherever you may be in your own personal or professional journey, I wish you joy and many moments that bless your days and years ahead.

# TRIBUTE TO AN AMAZING AND FEARLESS LEADER: DR. CAROLYN KREAMER, PH.D., R.N., CNE

Dr. Kreamer has been a nurse since 1969 and has worked primarily in acute care specifically, the intensive care setting in local hospitals. She began educating future nurses in 1976 and began her wonderful career at Messiah College in 1986. Dr. Kreamer became the chairperson of the Department of Nursing in 1999, and she has faithfully and tirelessly led the nursing department through several curricular changes, including Nursing Education Programs for the Commission on Collegiate Nursing Education (CCNE) accreditations, National League for Nursing (NLN) accreditations, and most recently, the initiation of the graduate programs in nursing at Messiah College. Dr. Kreamer is an outstanding professor of nursing, educator, leader, colleague and friend.

Dr. Kreamer graduated from the York Hospital School of Nursing in 1969, earning a diploma in nursing. She completed her bachelor's degree in nursing (B.S.) at the Pennsylvania State University in 1975. Dr. Kreamer's graduate studies were focused in nursing education in the clinical practice area of medical surgical nursing. She graduated from the University of Maryland in 1980 with a master's in nursing (M.S.). Finally, Dr. Kreamer earned her Ph.D. in adult health nursing from the University of Texas at Austin in 1989. Her most recent accomplishment was certification as a nurse educator (CNE) in 2011.

Dr. Kreamer's accomplishments are too extensive to list in exhaustive fashion, for she has been extremely active in nursing research and education over the course of her illustrious career. However, to mention a few activities and/or accomplishments:

Tribute, continued on next page



Carolyn's graduation picture from York Hospital School of Nursing, 1969

Tribute, continued from page 1

president of Lamda Kappa chapter of Sigma Theta Tau International (the honor society of nursing)—2012 to present; trained site evaluator for nursing education programs for the CCNE (and team leader since 2009)—2000 to 2013; and she serves on various boards and/or is involved in many organizations, such as Pinnacle Health System, Nursing Advisory Board of Robert Morris University and the Pennsylvania State Nurses Association (District 16).

Dr. Kreamer will be greatly missed by all at Messiah College! She is an amazing nurse who embodies the true spirit of nursing—serving others. She is an excellent role model and her career is to be admired and respected. The department has thrived and blossomed under her leadership and care.

As Dr. Kreamer looks forward to some relaxing time with her mother at home, she also plans to travel with friends and perhaps revitalize her passion for horses. She has



Carolyn and her horse, Fine and Dandy, in 1996. Fine and Dandy lived to be 21 years old, and Carolyn cared for him until his death in 2009.

won awards in the past with her horse and has a strong passion for caring for the animals and volunteering with therapeutic riding programs.

#### **NURSING EDUCATION...REVISITED**

By Sarah Wagoner '12

AS A RECENT GRADUATE OF MESSIAH'S NURSING PROGRAM IN 2012, I can distinctly remember the satisfaction of being, "completely done with school." I excitedly entered my nursing career without any intentions of ever going back to academics. This year, I learned that my need to run from God's plan fell pathetically short in comparison to what His will actually entails. After an incredible amount of prayers, pro/con lists, conversations with trusted mentors and arguments with myself, I began the journey towards achieving my master's degree as a Nurse Educator through Messiah College.

Thus far, the experience has been great. The online atmosphere allows me to work at my own pace while still working full-time at the Hershey Medical Center. The faculty members are just as supportive as they were for my bachelor's program, and they foster the same Christian atmosphere that is so important. Although the courses are chal-

lenging, they are expanding my knowledge to help me become a better nurse for my current patients.

During the spring semester, I also had the great experience of becoming a clinical adjunct for the Med Surg II class. This challenge has not only been rewarding, but has solidified my desires to be a nurse educator. The thought of teaching at my alma mater truly terrified me. At first, it felt exceptionally odd to be on the other side of the fence and instructing beside faculty that were and still are my teachers and mentors. However, my passion for nursing took over, and I slowly began to feel that I was prepared to step into this new role. I love taking the students into the clinical setting and supervising their hands-on experience. I can relate to their fears and concerns while reassuring them that they will succeed, as I have been in their shoes very recently. This semester I have been blessed to wear many hats. I am a nurse. I am an educator, and I am a student... sometimes all in the same day!

## STAFF SPOTLIGHT: STEPHANIE PATTERSON



MY NAME IS STEPHANIE PATTERSON and I am the administrative assistant to the coordinator of graduate nursing

programs at Messiah College. I am thrilled to be here and eager to have been appointed to this position in the exciting new graduate nursing program!

I grew up in Gettysburg,
Pa.—LOVE that town—and graduated from Millersville University
with a B.S. in English education.
Prior to coming to Messiah, I spent several years working at Capital Area
Pregnancy Centers as the fundraising event coordinator. Like Messiah,
CAPC is a faith-based organization
and I think it is a real privilege to be able to work in an atmosphere where I can openly express my faith in
Christ and love for Jesus.

I have two teenage children. Jake is 18 and is a senior at Mechanics-burg High School. Katie is 13 and will finish 7th grade this summer. My husband, David, and I were high school sweethearts and will be married for 25 years this fall. I love to read, read, read!!! I like to cook and garden too—but given a great book? Well, I can get lost in it!

Three "fun facts" about me:

- 1. I was a (not very good) triple jumper in high school with a career best jump of 26'2".
- 2. I am a PA certified English teacher—so ask me those APA questions!
- 3. I love the beach and the mountains equally and like to be in the Tuscarora State Forest (where my family has a cabin) as much as possible.

I share an office with Nancy Frank in Kline 026—so stop by for a visit or send me an email (spatterson@messiah.edu).

#### BEHIND THE SCENES OF CLINICAL EXPERIENCES

By Nancy Frank, clinical liaison placement coordinator

#### HAVE YOU EVER WONDERED WHAT

IS INVOLVED in setting up nursing student clinical experiences? When I was a nursing student, I took clinical experiences for granted. I never thought about the arrangements that were needed to make my clinical happen at a particular location and time. I believe most nursing students and parents do not realize what processes are occurring before, during and after clinical to provide for a successful educational experience. Therefore, I will share my role in behind the scenes clinical coordination.

About 4-5 months before students attend the clinical experience, I discuss the upcoming semester's clinical options with the faculty course coordinator. Most of the clinical sites remain the same each year, but occasionally new or additional sites are needed. After the clinical sites have been decided, I begin to send requests to the clinical agencies. Many clinical sites have a formal clinical rotation request process in order to coordinate all of the schools of nursing that use their facilities. The procedures to request clinical placements vary and sometimes require negotiation to receive permission to use the site. Pediatric and psychiatric nursing clinical experiences are especially challenging due to the large number of nursing schools requesting the limited number of sites.

New clinical sites require research to determine the appropriateness to the course, contact person and potential educational opportunity. After contacting the correct individual, I meet with him or her to discuss options for a clinical partnership. Typically, I share our course objectives and request particular days and times for the clinical experience. I am also interested in learning more about the agency and how we can work together. After the arrangements have been informally agreed upon, we begin work on a contract. The State Board of Nursing requires Messiah College Department of Nursing to have a current contract with each agency prior to student clinical experiences. This process always varies. Sometimes the agency agrees to our standard contract template and the negotiations are handled quickly. Other times, there can be months of negotiations between the lawyers of the agency and Messiah College as both parties work toward a mutually acceptable contract. After a contract has been agreed upon, it must be signed by the agency administrator and the Dean of the School of Science, Engineering, and Health.

Each agency also has specific requirements that must be completed prior to the students' clinical experiences. These requirements include certain immunizations and examinations, background checks and proof of insurance. Most students are

that may arise. One common concern is computer access. Each facility has a different procedure for students to obtain access to the computer charting. Unfortunately, sometimes the submitted forms are overlooked or the student log on does not work. I contact the necessary individuals to resolve the problem.

At the end of the clinical rotation, I assist in the distribution of online surveys to students and clinical instructors. The feedback we receive is used to determine future clinical sites and improve the clinical experiences. We have stopped using clinical sites based on concerns raised by the surveys. Also, I will address specific

# "One of the advantages of my position is the opportunity to hear many compliments about Messiah nursing students and clinical instructors."

familiar with this aspect of clinical preparation, but may not realize its importance. Before students are permitted to attend clinical experiences, I must submit proof that all requirements requested by the agency are met. Therefore, I am responsible to collect and track student documentation to make sure all students' files are complete. Students who have incomplete or missing requirements receive a reminder from me. This year I started to use our online learning management system, Canvas, to collect and track the student documents. The online submission allows the student to retain the original and organizes the documents for me, as well as decreasing paperwork loss.

After clinical experiences begin, I am responsible to problem solve issues

issues, such as parking, directly with the agencies. Thoughtful and honest responses are valuable and essential for program improvement.

Finally, I remain in frequent contact with clinical agencies throughout the year to ensure students are having optimal clinical experiences and receive their feedback. One of the advantages of my position is the opportunity to hear many compliments about Messiah nursing students and clinical instructors. The agency representatives often comment on the professionalism and high caliber of our students. This positive reputation supports negotiations with current clinical sites, as well as new ones. Thank you, students and faculty, for representing Messiah College Department of Nursing in such a positive manner.

# **WANTED:**

Nurse practitioners, physician assistants, physicians and hospital-based nurse educators to serve as clinical preceptors for Messiah College graduate nursing students

FOR MORE INFORMATION, PLEASE CONTACT:
NANCY FRANK, CLINICAL LIAISON PLACEMENT COORDINATOR

(717) 796-1800, ext. 3517 njfrank@messiah.edu

#### SPOTLIGHT ON SENIORS





## Compassionate servanthood

By Jacquelyn McNeil '14

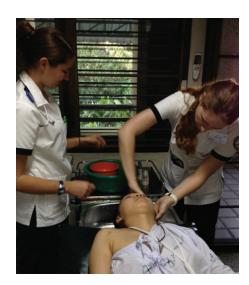
# "BE KINDLY AFFECTIONATE TO ONE ANOTHER WITH BROTHERLY LOVE, in

honor giving preference to one another; not lagging in diligence, fervent in the spirit, serving the Lord." (Romans 12:10-11) Loving others through service requires humility driven by compassion.

I recently spent a week providing patient care at one of the public hospitals in Chiang Mai, Thailand. The experience was part of my senior practicum during J-term. I was in a completely new location, which seemed to have different expectations, procedures and communication. As I wrestled with the overwhelming task of learning nursing skills "Thai style," the last thing I expected was to be used as an instrument of humble love and Christ-like servitude.

On my first day I was assigned to care for a Chinese patient who had suffered a motorcycle accident the night prior during a motorcycle tour of Thailand with her friend. She sustained a fractured arm, a deep gash in her axillary region, a hemopneumothorax and multiple abrasions. My







patient and her friend could not speak or understand the Thai language but were fluent in Chinese and English. Some of the Thai nurses could speak varying degrees of English, but she was struggling to understand them through their thick Thai accent and broken phrases. This difficult language barrier produced considerable anxiety in my patient.

When I heard of her struggles, I felt great compassion for her. How terrifying to be in a foreign country, completely isolated from family, in immense pain, and unable to communicate or understand what was happening! I cared for her every day that week, not only tending to her painful

wounds but also serving as her translator and advocate. As we interacted, I began to realize that simply providing understanding and an avenue for communication was both valuable and comforting to this patient.

By day four, my Chinese patient had improved enough that her chest tube could be removed. I explained the procedure and talked her through the experience. She was grateful not only for the assistance, but also for the relational support, since her friend was not present due to the restricted visiting hours. Shortly after this event, she asked if I would be willing to comb her

Servanthood Spotlight, continued on next page

Servanthood Spotlight, continued from page 4

hair. Her arm movements were restricted due to her axillary sutures and fractured arm, so this simple task had become a significant challenge for her. As I combed through her hair, she began apologizing for its dirty state. Sensing her embarrassment, I offered to wash her hair. With the assistance of my Thai instructor and a fellow student, I scurried around to gather supplies for a salon-style hair washing at the patient's bedside. I took my time, carefully attending to her comfort to make her feel "beautiful" once again.

In the public Thai hospital, having family present is crucial, because personal care of the patient is the responsibility of the patient's family members, not the nurse, nor the aide. If a patient needs assistance with a bed bath, teeth brushing, hair combing, or any other personal care action, his or her family member must provide the assistance during visiting hours. If no family member is available, the task is simply left undone.

# "I thought, 'This is what nursing is.' Nursing is compassionate, humble service to someone in need."

Although I provided a simple task—a fundamental skill learned early in my nursing education—this gesture of cleanliness translated into an act of compassion and humility that touched her deeply. As I turned to leave, she handed me a chocolate rose and thanked me for my faithful care for her. I had not realized the impact of my actions until that moment. My instructor later commented, saying, "You were her angel." I was overwhelmed with joy at the realization that I had touched someone so deeply! I thought, "This is what nursing is." Nursing is compassionate, humble service to someone in need. It is going the extra, compassionate mile to give a hair washing instead of a brushing just to put a smile on the patient's face. It is healing both body and spirit by showing the love of Jesus to the broken and the hurting. In that moment, I was proud to be a nurse.



Zambian women stop to pose for a picture in the midst of their daily work.

# My taste of outpatient department: Macha Mission Hospital, Zambia

By Christa Matthews '14

#### ONE WEDNESDAY MORNING AT THE

**HOSPITAL,** Jill, Courtney and I went into the Outpatient Department (OPD) to observe. We quickly realized we weren't going to be just observing, as the staff were eager to teach us how to triage patients and do the things they do in order to make their days easier. It was a long room with long benches with long lines of patients that needed weighed, vital signs, malaria tests and to see a doctor eventually. There were a variety of people sitting in these benches, and most of them walked to the hospital. There were noticeably sick children, malnourished adults, well-dressed ladies, dirty elderly men and everything in between. Perhaps the most striking and disturbing, however, was an elderly woman who was carried in by her midtwenties grandson and his wife. I watched from a distance as they laid her down on a bench. She looked totally lifeless. She was thin and dark skinned, and wrapped in traditional Zambian fabric. Almost instantaneously after laying down on a bench she urinated on the floor. Someone took one of the pieces of fabric she was wrapped in, wiped the floor, and put the fabric back on her. Jill and I went over to each other, brainstorming how we could get

this woman help as we took her vital signs. Her body was bony, her face grimaced, and her heart and lungs accelerated. We were almost positive she was in shock and we, the American Messiah students, were the only ones around. The blood pressure Courtney got for us was incredibly low, 40s/20s; we grabbed a PCA and they told us to merely give her a number to wait in line to be seen. In our minds though, we knew this patient could not wait three hours to be seen by a doctor. She was in shock, her blood pressure was bottoming out and we found ourselves fighting for this patient to be seen amongst a language barrier and cultural barrier with a lack of urgency. We divided and conquered the OPD that morning; we needed to find someone we could communicate with and who would listen to our insight about this patient. The longer I looked at this woman the more frightened I got. I frantically ran to find another worker to inform about the situation, who would hopefully help us get this patient into the doctors exam room as soon as possible. She needed IV fluids desperately. Letting her sit and wait was against our judgement, and Courtney and Jill continued passionately advocating as I was searching for someone else to show us where this woman could go. I found a man outside, singing and listening to African music, and obviously enjoying the "break" we gave him from being there to triage for him. I quickly explained the

Zambia Spotlight, continued on next page

Zambia Spotlight, continued from page 5





Above left: Senior nursing students Hannah Barber and fill Hagerott dress in traditional Zambian attire. Above right: Local wildlife dine on the leaves!

situation, but again there was no sense of urgency. He insisted on trying to get a blood pressure reading on this woman for himself, and the three of us students were getting upset and nervous. I was holding the patient in my lap as she struggled to hold any of her body weight upright for the blood pressure reading. He wasn't

able to get a reading after several attempts, and we repeatedly were trying to tell him that it was because she was bottoming out. Her breathing was more labored and she was continually weaker. I explained the situation to her grandson, and I truly believed that in those moments sitting with this woman slumped over in my lap, she could have died on me. I couldn't find a carotid pulse from my position, but Jill found a very weak and slow one. The worker directed us through another room to go to a doctor's office. The patient's grandson and I supported her under her arms as we walked slowly through the crowd of people to the doctor. After we exhausted this

patient's energy completely, we found out

room. At this point, she looked at me and

that there actually was no doctor in that

said in a weak whisper, "I'm too weak,"

which was when I picked her up with her grandson and his wife and carried her to the other end of the building. We barged into another doctor's room along with Courtney and Jill, and we explained her vital signs and her need for IV fluids. The doctor said she was in shock, confirming our original thought, and acted urgently

"Her breathing was more labored, and she was continually weaker. I explained the situation to her grandson, and I truly believed that in those moments sitting with this woman slumped over in my lap, she could have died on me."

to start and IV and fluids wide open. We stayed by the patients side and held her hand as she rested and started coming back to life as the fluids rushed into her. We were on such an adrenaline high in those moments, trying to fully grasp everything that had just occurred because of what we were doing. I am so proud of my friends and myself for rushing around and doing something about this patient we

were with—almost all of it we did without having to discuss with each other. We all knew what needed to be done, and we all did different things to help get that patient back in the room faster. We collaborated so well in those moments, and we felt so confident in our knowledge in those moments as well. I know we helped someone

because we were there. I'm sure there were other health issues going on with this patient, and I will never really know what they are, but I know in those moments in OPD we advocated for this patient in the midst of a lot of opposition. If the Messiah students weren't there that day, this woman would've died on a bench there. That morning, we were able to see an emergency situation play out right in from of our eyes and see

the extreme cultural differences through that lens. I am forever thankful to have had this experience in the OPD that morning to learn about a different way of health care, to be able to truly advocate for a patient and her family, to be confident in my knowledge, and my friends who's judgement I trust among many other things.

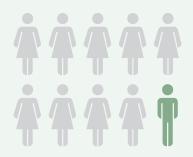
## A MALE NURSING STUDENT'S PERSPECTIVE

By Trevor Praetsch '14

THE HISTORY OF NURSING HAS ALMOST **EXCLUSIVELY BEEN DEFINED** by women's accomplishments. The male involvement in holistic patient care has not been fully revealed in historical teachings on the profession. The truth is, there is a pertinent history that is not as readily taught as good old Flo' Nightingale and her nurses during the Crimean War. Names like Friar Iuan de Mena and Walt Whitman serve as a reminder of the early involvement of men in holistic patient care. These men wrote in their poems and writings about their innate want to serve and care for others. From his poem "The Wound-Dresser," Walt Whitman wrote: "One turns to me his appealing eyes—poor boy! I never knew you, yet I think I could not refuse this moment to die for you, if that would save you." The instinctive sense of compassion and self-service that Whitman portrays from his volunteer nursing during the Civil War shows the characteristic of empathy. Using recorded writings from people like Friar Juan de Mena and Walt Whitman can be effective tools to teach nurses, much like the historical teachings of female nurses.

It is certainly considered unique to be a male pursuing a career in nursing. Data show that as recently as 2011, only 9.6 percent of nurses were male. This seems like there are few male nurses, but when it is compared to figures from 1970 that demonstrated only 2.7 percent of nurses were males, the growth of men in nursing is considered clear and exponential. In my experience as a male nursing student, I have felt supported and encouraged by peers and most patients and their families. Where I meet some resistance is from the female geriatric population. Understandably, the Silent Generation is accustomed to having a female nurse and male physician because of their historical and statistical prevalence in the mid to late 1900s. Initially this was a great frustration of mine. As I continued further into my education, I realized that in order to have patient satisfaction I cannot take this bias personally, but rather I need to find what the patients' preference are and act accordingly. Initially nursing wasn't accepted as a professional organization, but over time it became accepted and respected—in fact, nurses are consistently rated highly by the

MALE NURSING
STUDENTS
BY THE NUMBERS



percent of students enrolled in baccalaureate nursing programs

percent of students currently pursuing master's in nursing degrees

According to a recent survey conducted by the American Colleges of Nursing (December 2011)

public as far as being trusted and respected. I feel that eventually men will be fully established as professionals within the vocation of nursing. This trend has been evolving, and I hope it continues as more males are drawn to nursing as a calling as well as a career. I believe much could be done to help pave the way as far as reaching out to the patients we serve—educating our patients and our elders that male nurses have a lot to offer! We bring compassion, technical skills, as well as strong minds, hearts and bodies. Last, but certainly not least, we should encourage more males to enter the field of nursing. We need the diversity that males offer the profession.

## ADJUNCT NURSING FACULTY

#### **FALL 2013**

Cheri Bechtel, BSN, R.N.-BC –
NURS 211
Joan Ras, BSN, R.N. – NURS 410
Patty Stehman, BSN, MSN, CRNP –
NURS 410
Jamie Gahr, MSN, RNC – NURS 310
Philina Henton, BSN, R.N. –
NURS 410
Nicole Meekins, BSN, R.N. –
NURS 211
Karen Miller, MSN, FNP-BC
Natasha Miller, MSN, R.N., CCRN,
CWOCN – NURS 411
Danielle Oakes, MSN, R.N., CRNP –
NURS 311

Rachel Obenschain, BSN – NURS 410 Melody Seitz, MS, RNC-OB – NURS 310

Jeff Stroup, MSN, R.N., CEN – NURS 411

#### **SPRING 2014**

Maureen Asper, R.N., MS, ACNS-BC – NURS 412

Cheri Bechtel, BSN, R.N.-BC – NURS 211

Sarah Curtis, BSN, R.N. – NURS 211 Sarah Hager, BSN, R.N. – NURS 312 Jennifer Hughes, MSN, BS, R.N., CCRN – NURS 312

Joanne Konick-McMahan, MSN, R.N., PCCN – NURS 413

Paul Logan, MSN, CRNP – NURS 210 Nicole Meekins, BSN, R.N. – NURS 211

Danielle Oakes, MSN, R.N., CRNP – NURS – NURS 412

Jenny Rex, MSN, R.N. – NURS 313 Martha Solomon, MSN, R.N. – NURS 495, NURS 413

Jeff Stroup, MSN, R.N., CEN – NURS 312

Sarah Wagoner, BSN, R.N. – NURS 312

Emily Nolen, BSN, R.N. – NURS 210/211

Talisha Sneeringer, BSN, R.N. – NURS 210/211

Rachel Pham, MSN, R.N. – NURS 210/211

Melody Seitz, MS, RNC-OB – NURS 211

Amanda Cresswell, MSN, RN, CMSRN – NURS 413

# SIGMA THETA TAU INTERNATIONAL: FALL 2013 INDUCTION CEREMONY

# THE LOCAL CHAPTER EXECUTIVE BOARD OF SIGMA THETA TAU, Lambda Kappa, hosted a fall induction ceremony on November 2, 2013 at Messiah College campus. Dr. Carolyn Kreamer delivered the Keynote Address which was followed by dinner and dessert for the new honor soci-

Keynote Address which was followed by dinner and dessert for the new honor society members and their families. Numerous faculty members from the Department of Nursing were also in attendance to share in this special occasion.

Nominees for induction into this honor society must achieve a cumulative grade point average in the top 30 percent of their class. The following 2014 nursing student graduates were inducted into the distinctive Sigma Theta Tau Honor Society of Nursing: Kimberly Benson, Laura Black, Elizabeth Marie D'Amelio, Kirsten Davidhizar, Rachel Alexandra Faber, Joanna Frederick, Kaitlyn Rose Hoover, Shannon Elizabeth Kelly, Supakorn Kueakomoldej, Daniel Mauger, Lauren McClure, Jacquelyn McNeil, Sarah



Back row (left to right): Kirsten Davidhizar, Shannon Kelly, Laura Black, Joanna Frederick, Kaitlyn Hoover, Daniel Mauger, Rachel Faber, Jacquelyn McNeil, Kelly Urmston, Abigail Wade, Lauren Allison, and Kathryn Stewart; Front row (left to right): Julie Schmidt, Lauren McClure, Kim Benson, Elizabeth D'Amelio, Supakorn Kueakomoldej, and Alyse Weaver; Not pictured:

Pedersen, Julie Schmidt, Kathryn Stewart, Kelly Anne Urmston, Abigail Wade and Alyse Margaret Weaver. Also inducted was nurse leader, Lauren Allison, BSN, R.N., an adult critical care nurse who works at the Penn State Hershey Medical Center.

# MESSIAH NURSING STUDENTS "SCORE" AT STATE CONVENTION!



Members of the Messiah College SCORE! NCLEX Challenge Bowl team: (left to right) Daniel Mauger ('14), Supakorn (Mint) Kueakomoldej, Kathryn (Kayleigh) Stewart, Jennifer Ranck (alternate), Kaitlyn Hoover and Trevor Praetsch

CONGRATULATIONS TO THE MESSIAH COLLEGE STUDENT NURSES'
ASSOCIATION CHAPTER for their 3rd place finish in the SCORE! NCLEX Challenge Bowl statewide competition held at the PA State Student Nurses' Association Convention in November. Members of the Messiah College team included senior nursing students: Daniel Mauger, Supakorn (Mint) Kueakomoldej, Kathryn (Kayleigh) Stewart, Jennifer Ranck (alternate), Kaitlyn Hoover and Trevor

Praetsch. This year was the first time a team from Messiah College participated in the SCORE! NCLEX Challenge Bowl.

This is the sixth year that the SCORE! NCLEX Challenge Bowl Competition has been held at the PA Student Nurses' Association Convention. Sixteen teams from schools of nursing across the state of Pennsylvania participated in the competition with the goal of winning the SCORE! NCLEX Challenge Bowl Award and Trophy.

"Congratulations to all the students who participated.

I know there were II teams, and placing third on the very first try at this competition is fabulous. I'm very proud of each one of you." — DR. CAROLYN KREAMER

## MESSIAH COLLEGE NURSING CLASS OF 2013 AWARD WINNERS AND HONOR GRADUATES





Corinne Wulf
Excellence in Nursing Award
and Academic Excellence in
Nursing Award



Alyssa Benner
Academic Excellence
in Nursing Award



Morgan Hartz
Pennsylvania State Nurses
Association District I5 Award
for Leadership



Rachael Capeci
Christy Stark Smith Award
for Achievement in Nursing Care
of the Child Bearing Family

#### COLLEGE HONORS PROGRAM

(demonstrate high scholarly ability in their academic career and intellectually rigorous Christian worldview, equipping for lives of leadership and service)

Ellen Rebecca Harpold Morgan Joyce Hartz

#### **NURSING STUDENT GRADUATES**

#### **Summa Cum Laude Graduates**

(grade point average of 3.90 or above)
Alyssa Benner
Julian Kay Keller
Corinne Lee Wulf

#### Magna Cum Laude Graduates

(grade point average of 3.60 to 3.89)
Rachael E. Capeci
Kirsten Alexandra Eller
Morgan Joyce Hartz
Nicole Marie Hess
Izada Soojung Park
Jenna Kay Raup

#### Cum Laude Graduates

(grade point average of 3.30 to 3.59) Lauren Marie Buckwalter Danielle Loreanne Caley Jillian Rose Carp Jessica Rae Clark Leah Elaine Compton Ashley Lorraine Conwell Holly Jeanne Craven Cassandra Anne Crowder Laura Janet Duncan Rebecca Lynn Fox Stephanie Marie Galvez Ellen Rebecca Harpold Amy Alayne Hess Vanessa Marie Jordan Nathan Curtis Masterson Morgan Leigh Petrie Hannah Rae Railing Christina Alaina Rott Erin Marie Royer Hannah Tracy Schutt Josalyn Ana Smith Kayla McKenzie Smith Jada Pauline Vance Natasha Lou Webster Jungmin Yoo Brittney Lynne York Katina Rose Yousey

Ruth E. Ziegler



"We live in a wonderful

world that is full of

beauty, charm, and

adventure. There is no

end to the adventures

that we can have if only

we seek them with our

eyes open."

- JAWAHARLAL NEHRU



Left: Audrey with her dog Pepper; Right: Audrey with a wolverine

#### Alaskan adventures

By Audrey Hanselman '13

"WOW, I MOVED TO ALASKA!!" THIS THOUGHT ENTERS MY MIND as consistently as the winter sun appears here: almost daily. It is pondered with a great sense of wonder and adventure, the same two things that lured me to return more permanently after my first visit to 'the Last Frontier.' A dream that budded between

semesters of nursing school at Messiah College came to fruition in January 2014 when I landed in Anchorage, Alaska's largest (but not capital) city. Though taking me from family, friends and my first 'grown-up existence' in Harrisburg, Pa. – the place where I first rented a house (with wonderful friends), learned how to fix a dysfunctional refrig-

erator and worked as a registered nurse – this dream landed me in a warm home of family friends, and into a job that still seems too good to be true.

Three short days into my move, after securing my Alaska driver's license, medical clearance and REI (Recreational Equipment, Inc.) membership, I began to train for my new role as a nurse home visitor for the Nurse-Family Partnership program. A new dream was unfolding as I considered my upcoming ventures into the homes of Anchorage's low-income women, pregnant with their first babies. Here, I would have the opportunity to work alongside these women to develop lasting therapeutic relationships, improve health outcomes for mothers and babies, encour-

age self-sufficiency and establish fundamentals for successful parenting. And all of this in 60-90-minute visits, weekly or bi-weekly throughout pregnancy and until the child's second birthday. I cannot think of more inspiring work; I am blessed to encourage a brighter future for new mothers and their growing families.

Since those first, fresh days, I have embraced numerous joys

and challenges. Some days I experience these while sitting on a couch, listening to the description of baby's first kick, the fears of passing down a legacy of drug abuse to the little one growing inside, or the uncertainty of tomorrow's dollar. Other days I spend summiting a snow-covered

mountain, training my stomach to embrace the turbulence of a small bush plane, or mastering the art of communication across miles and time zones to those I love. For adventures had, and those anticipated, Alaska continues to wake me up each new day, eager for what it has to offer.

"We live in a wonderful world that is full of beauty, charm and adventure. There is no end to the adventures that we can have if only we seek them with our eyes open." – Jawaharlal Nehru, but more importantly, written in a letter to me by my younger brother as I departed, entitled 'Reading Material for Your Long Flight [to Alaska].'

#### Nurse-led

By Christy (Hitz) Shenk R.N., BSN 'II

## I WAS ON MESSIAH COLLEGE'S WEBSITE

**LAST WEEK** and took a few moments to watch the banner of pictures scroll by on the homepage. I was struck by the titles that accompanied the pictures: a sense of calling, an ethic of servanthood, hospitality for the whole person, authentic power to lead. The last one, in particular, caught my eye. Authentic power to lead, I thought. What does that mean?

As a new nurse manager, leadership has been on my mind lately, along with other words like responsibility and

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accountability. What does real leadership look like? Is it coaching, mentoring, decision making, laying down the law or something else entirely? As I thought about the topic, it occurred to me that all nurses, not just nurse managers, are equipped to be leaders in patient care.

The hospital where I work is currently reapplying for Magnet status, and in a recent meeting we discussed the importance of the organization being "Nurse-Led." I envisioned, during this meeting, what a truly "Nurse-Led" organization would look like. First and foremost, it would be patient-focused. In every organization, nurses are in a unique position to comment on the processes, procedures and practices that affect patient care every day. Nurses, more than any other position within health care, are present with the patient throughout the hospital stay, as firsthand witnesses to the patient's experience within the hospital.

Secondly, I imagined, a Nurse-Led organization would be nurse-focused. That organization would realize that investing in nurses means investing in the future

of health care and the longevity of the organization. Nurses who are well educated, grounded in evidenced-based practice, knowledgeable in their specialty and recognized for their exemplary patient care make for safer and more satisfied patients. Transitioning into the role of nurse manager has been challenging, overwhelming, fun, and, many times, humbling. Over and over, I am amazed by the nurses I work with: their experience, flexibility, ingenuity, compassion and integrity. As the nurses I work with become leaders on education committees, pride councils, quality committees, practice councils and in research conferences, they speak for their patients on many platforms and in many different ways. Each of these nurses has the ability to be a leader who demonstrates the "authentic power" that comes with nursing, the genuine and powerful voice of real patient experiences, and the motivation to improve the care and outcomes of patients everywhere.

As I reflect back on my time studying at Messiah, I can clearly see how well prepared the nursing faculty made sure we all were to address the leadership side of nursing. I can remember advocating for bills on Capitol Hill Day to advance patient care, sitting in meetings during our leadership course to understand how hospital committees worked, and presenting research posters on strategies to improve patient outcomes. And then, of course, there were all the electives that broadened our understanding and background in writing, communication, religion and history.

As I look around in an organization taking steps to be Nurse-Led, I can already see that nurses hold prominent places in quality, education, research, business, nursing practice, finance and bedside care. Nurses have a voice on every level of the organization and in many different "silos" of the health care business. I can see the future of nurses as leaders, and it's happening even now. Do you feel called to serve as a nurse? Then be prepared, someday, to act with the authentic power of a leader.

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