

## Merit Grant Scales

\$2000

This grant was written for the purchase of scales to be utilized by the nursing students learning the importance of a “dry” weight on each patient. As patients come to the hospital, their entry weight is often referred to as the “dry weight”. Often during the course of the hospitalization, the patient may become ill and “take on weight” through water gain and failure of organs. It is imperative that the student understand how to perform a weight on a patient and that performing a weight on the patient is to be done on every admission. For this purpose these scales were purchased.



## Simulation Lab \$53,000

This grant was the vision of Susan Rasmussen. As Co-coordinator of the first semester and lab coordinator, I worked in collaboration with Susan to obtain funding that would turn the “make-shift lab” into a Simulator Observatory. By this plan, the Perkins Foundation monies funded a reorganization of the lab where it evolved to an observatory for the students. The new construction allowed the students to view a classmate working through a simulated crisis by way of an overhead camera. The faculty could manipulate the crisis from the observatory. From this observatory, the faculty could communicate with the student thus monitoring the students’ skill in critical thinking (managing the crisis) and procedures performed (insertion of an IV). Once the scenario is complete, the faculty sat with the students at the debriefing table ( purchased with the Perkins funding) and discussed the scenario: what went right, what went wrong; what could be done differently. This environment afforded by the Perkins funding gave the faculty real life experiences for the student in a controlled and safe environment. This was essential to the learning process because the faculty never has control of types of patients (with what type of illnesses) will be at the hospital for the students to care for.

Hydraulic Stretcher Merit Grant Foundation \$2000



This hydraulic stretcher was purchased and is the home for our METI Simulator. It affords good presentation of the METI simulator and it allows the students to practice transfers of the patient from bed to stretcher and basic maneuvering of the stretcher with a person on it.

## Simulation in Families through Perkins Foundation

\$23,000

I continue to practice as a nurse in the Critical Care environment at Utah Valley Regional Medical Center. The staff will discuss with me their opinions of nursing students. One of the prevailing opinions is “The new grads can’t pull it all together. They don’t bathe their patients nor do they clean the patient’s rooms. It is as if some things don’t connect. They can’t keep up because they get lost and can’t manage their time well”. I wanted to teach the student “the whole patient”. I wanted to teach the student about “start of shift to end of shift and staying caught up in between”. For this reason, I needed more simulators and I wanted families of simulators; the patient usually has a family. I wrote the grant and purchased the simulators.

I am teaching in family scenarios. I authored a book relative to this process. ( ). The student receives a scenario of a family. The families are of diverse backgrounds. The student will follow this family for several classes treating the family for different illnesses and life circumstances. The care of the family starts with the interview, the physical assessment (checking lungs, heart, looking at the body during the bath) and continues to medicate and ensure the patient is comfortable. The simulators are built with heart sounds, with lung sounds, with open wounds, with surgical orifices which makes it easy for me to create a real life scenario around these anatomical irregularities. Because of the diverse problems built on the simulators I am able to create a variety of scenarios for the students to work through in the laboratory setting. These scenarios prepare the students for real life scenarios at the hospital as they learn in a safe environment under supervision of the faculty. It also affords me the ability to ensure the clinical experience needed to be learned (insertion of Foley catheter) is experienced (simulated in lab)

because I cannot always duplicate an experience at the hospital or care facility. The ability to duplicate experiences in the hospital or care facility depends on the patients and if they have orders for the procedures I want to duplicate for the students.



Simulation in families. This student is examining the child and the mother. The learning experience incorporates the family as a whole

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## AED's

\$1600 Merit Foundation \$4500 Perkins

I had the privilege of serving as the Chair of Student Welfare for the NCAA Self Study. There were many areas requiring research and this was a tedious process. I discovered that the student athletes did not have an AED on each practice field, nor was there one on the buses when they traveled. This was a huge concern of mine. I made the recommendation that all coaches and team captains be BLS (Basic Life Support) certified and that there be AED's on each practice field during practice and on each bus during travel.

Making the recommendation made perfect sense to me as a registered nurse of 35 years. There was still an issue of funding. I wrote grants through Merit Foundation and through the Perkins Foundation. The AED's were purchased for use by the Athletic Department and subsequent practice and maintenance is supplied by the student nurses. Andrew Nelson, Athletic Trainer, became BLS certified to teach the course and annually he monitors and ensures the staff



is BLS certified.

## Perkins Grant \$4500

### Student Response Systems

#### Turning Point Technologies

> Studies have shown the use of interactive teaching methods in the classroom can significantly increase student learning.

#### Improving the college learning environment



Research has shown that a key trait common to highly regarded instructors is their ability to engage students, which keeps them alert, focused and on-task. One of the best methods of accomplishing this is to provide interesting lessons, creative activities, and open discussions that encourage all students to participate.

***Beyond Question*** is an interactive student response system that provides the tools needed to actively engage every student in the classroom. By using wireless response devices, students are eager to participate in class discussions and surveys. Daily quizzes and subject matter reviews can be given to assure that the material is being learned. Automatic grading reduces the professor's workload, freeing up valuable time that can be better spent elsewhere.



Students can answer multiple choice, true-false, yes-no and survey style questions that the professor presents to the class. Once the students have responded, the results can be displayed providing feedback to both the professor and the class. Correct answers help build student confidence and mistakes can be immediately corrected. The professor can modify the pace of the lecture, in real-time, to match the needs of the class.

**UVU purchased a license and limited software through this company. The nursing department will now have their own set of 50 student response units. This type of class interaction is in line with current teaching technology and is a preferred learning style of some students. Nurses use much technology in their practice of care delivery. This is a needed complement in the classroom.**