MESSAGE FROM THE DIRECTOR DR. SANDRA K. EGGENBERGER:

The Glen Taylor Nursing Institute for Family and Society continues to actively initiate, guide and support initiatives that aim to improve family and societal health. During the recent year the Institute has actively engaged with Minnesota State University Mankato (MSUM), as well as the regional and international community in advancing the science of nursing practice to support families and communities. Since the launching of the Institute in 2008 with a seven million dollar endowment from Glen and Becky Taylor strategic plans (annual and five year) have been developed, projects implemented and goals accomplished. An overall focus of the Director has been to launch a sustainable institute that improves the health of families and society through the advancement of nursing practice, research and education. The Taylor Advisory Council, Taylor Visiting Scholars, Becky Taylor Fellows, and School of Nursing faculty remain integral elements of the Institute.

The Glen Taylor Nursing Institute for Family and Society continues to receive support and consultation from the Taylor Advisory Council who are internationally recognized scholars, experts, and leaders in the areas of family and societal health. Five of the six original members of the Advisory Council have made a renewed commitment to the purpose, mission, and growth of this Institute. As the Director I view the Taylor Advisory Council’s desire to remain an integral part of this Institute and MSUM as an indication of our continued progress and forward direction. As an internationally recognized member of the Taylor Advisory Council stated in her recommitment letter, “This is an unprecedented opportunity for family and societal nursing. I am honored to serve this Institute that is having an impact on nursing practice in countless ways. I certainly intend to stay committed to this Institute as the early vision becomes a reality.”

The Taylor Visiting Scholars include a variety of experts who have contributing to building the capacity of the School of Nursing faculty to enact the mission of the Institute. Visiting Scholars have also provided regional health care systems with direction and guidance in developing strategies to improve family and community health. Both rural and metropolitan health care systems and communities collaborated with the Visiting Scholars. During the past year Visiting Scholars included experts in family and societal health and nursing practice who continued to collaborate with the Institute’s regional and international partners. Taylor Visiting Scholars shared their knowledge at local, regional, and international events and conferences, supported by the Institute, to meet the goals of strengthening the external capacity of our health care partners to advance family and societal nursing practice.

The Becky Taylor Fellows with the guidance of faculty and Visiting Scholars have continued to conduct exemplary practice projects that advance nursing practice and improve the health of families and society. Graduating Becky Taylor Fellows remain committed to the Institute, MSUM, and assuming leadership positions in their roles. The Becky Taylor Fellowships are strengthening the Doctor of Nursing practice. Moving from a consortium DNP program MSUM is now accepting applications for its own BSN to DNP and post-masters DNP program. The process of seeking support from The Becky Taylor Fellowships includes a competitive review process resulting in exemplary doctoral students who are able to use the Becky Taylor Fellowship funds to support their education. Becky Taylor continues to connect with these recipients of a fellowship when they are awarded the funds, as well as learning from their project conclusion and dissemination.

The Institute continues to support faculty as they launch education, research, and practice projects focused on family and societal health. Numerous faculty are now leading and guiding initiatives that aim to advance nursing practice and improve health. In the recent year the Institute and Director of the Institute have provided financial, partnering, consultation, guidance, and emotional support to faculty as they develop, implement and disseminate initiatives that align with the mission of the Institute. Recently the Institute assisted faculty to collaborate with colleagues in community and health care systems at the local, regional, and international level.

The Institute was a patron sponsor supporting the formation of the International Family Nursing Association (IFNA). IFNA fosters the individual and collective development of nurses involved in the promotion of health care to families by providing a unique international forum of shared responsibility for the advance of family nursing education, practice and research. Currently IFNA has 128 members, representing 17 countries. In June 2013 the Institute was named the official sponsor of the IFNA conference that brought over 425 participants from more than 30 countries to Minnesota. MSUM School of Nursing faculty played a key role in this conference by offering pre and postconferences that highlighted our excellence in family nursing education, research and practice. Several Institutes’ practice partners also offered presentations that highlighted their initiatives to improve health of families and society. This event provided the opportunity for the Institute and MSUM to increase their visibility in the world of family nursing.

Plans are underway to further refine the five year strategic plan, increase interdisciplinary partnerships, strengthen collaborative research, education, and practice initiatives and continue efforts to find avenues to sustain the Institute.
The vision of the Glen Taylor Nursing Institute for Family and Society within the School of Nursing is to be known and recognized nationally for being an intellectual community that creates landmark innovations in the scholarship of family and society nursing practice.

The mission of the Glen Taylor Nursing Institute for Family and Society is to focus on innovative nursing practice knowledge that influences the health and healing of families and society. At local, state, national, and international levels, the Institute’s aims to provide leadership and expertise in family and society health related issues.

The Purposes of the Glen Taylor Nursing Institute for Family and Society are to:

- Support the scholarship of nursing practice with emphasis on advancing family and societal health and healing.
- Establish and nurture an intellectual community of scholars with the intent to generate innovative ideas and policies to improve family health in society to address society’s needs.
- Support development of inclusionary models that translate knowledge for the purpose of changing practice and improving family and societal health and healing.
- Intentionally focus on development, testing and dissemination of nursing practice models that attend to the unique nature of families within the rural setting.
# Strategic Plan for The Glen Taylor Nursing Institute for Family and Society

In spring of 2012 the Taylor Advisory Council reviewed 2008-2012 strategic plan and substantiated evidence indicating the Glen Taylor Nursing Institute for Family and Society was initiating all elements of the strategic plan and directions were aligned with the mission and vision of the Institute. (See appendix) Subsequent consultations with Director of the Institute, Visiting Scholars, and Taylor Advisory Council resulted in formation of strategic plan 2013-2017 setting current directions for the Institute.

<table>
<thead>
<tr>
<th>Planning Area</th>
<th>Year 4 2013-2014</th>
<th>Year 5 2014-2015</th>
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<tbody>
<tr>
<td>Curricula Revision (Family &amp; Societal Health Focus)</td>
<td>Fully Implement Curricula &amp; Revise As Needed: BSN RN to BSN Graduate: FNP -DNP</td>
<td>Begin evaluation of courses and programs related to family and societal health. Expand simulation that focuses on family and societal health to graduate program. Further test simulation effectiveness related to family and society.</td>
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<tr>
<td>Faculty Development</td>
<td>Identify and plan faculty skill development needed related to Scholarship (e.g. grant-writing, writing for publication, scholarship topics focused on family &amp; society) Invite Taylor Advisory Council/Taylor Visiting Scholars to participate in skill development. Identify Taylor Visiting Scholars focused on DNP Curriculum and Family &amp; Societal health with faculty teaching in DNP. Mentoring and Partnering activities with faculty conducting scholarly activities: - Family Caregiving in So. Mn - Community Based Action Research in Madelia - International Family Systems Nursing Collaboration with Hospitals: HCMC &amp; Fairview Ridges</td>
<td>Continue support Family &amp; Society faculty Scholarship. Extend to University and beyond. Continue Faculty Skill Development in Scholarship. Visiting Scholars Work: Community (University and Beyond to health care systems) Expand Interdisciplinary Projects: Chesley Center for Aging Continue Mentoring Begin Exploring Process of Endowed Chair?</td>
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<tr>
<td>Support and Advance Family and Society Scholarship</td>
<td>Faculty and Practice Partners</td>
<td>Graduated Student Supports &amp; Fellowships</td>
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<td>Provide support for faculty scholarship aligned with the Institute.</td>
<td>Continue to identify focal areas to build streams of faculty scholarship.</td>
<td>Continue engaging students in research related to family and societal health.</td>
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<tr>
<td>Identify seed monies for pilot work for faculty scholarship (eg., local, STTI, HRSA, Fndn.).</td>
<td>Submit grant for external funding for projects and the Institute.</td>
<td>Develop research for student thesis &amp; project work.</td>
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<td>Participate in manuscript development and submissions; participation in national/international presentations.</td>
<td>Continue faculty development and support in areas of family and societal health.</td>
<td>Provide family and societal seminars for Becky Taylor Fellowship recipients.</td>
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<tr>
<td>Continue faculty development and support in areas of family and societal health.</td>
<td>Support faculty dissemination of scholarship aligned with Institute.</td>
<td>Continue Becky Taylor Fellowship &amp; Dissemination award.</td>
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**Outreach (local, state, national, international)**

<table>
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<tr>
<th>Develop and implement First summer Family &amp; Societal Health Institute conference. Summer, 2014 Focus</th>
<th>Plan and implement practice outreach.</th>
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<tr>
<td>Establish a Presence for Potential Students &amp; Faculty</td>
<td>Establish a presence at National and International Events related to family &amp; societal health.</td>
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<tr>
<td>International Presence</td>
<td>Encourage faculty and student participation at IFNC</td>
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<tr>
<td>Policy Advocacy</td>
<td>Begin building relationships with state legislative bodies focus on family and societal health issues of concern. Further explore Family Center with HCMC</td>
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<td>Explore changes needed based on scholarship:</td>
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<td>• Caregiving Research • International Research Project • Madelia Community Based action Research</td>
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POTENTIAL FUNDING OPPORTUNITIES BEING EXPLORED 2012- PRESENT

Partnering with Lippincott’s Docu Care – Maverick Family Project

Lippincott Williams & Wilkins (LWW) is a leading international publisher of professional health information for physicians, nurses, specialized clinicians and students. LWW provides essential information for healthcare professionals in print and electronic formats, including textbooks, journals, CD-ROMs, and via Intranets and the Internet. Products available include drug guides, medical journals, nursing journals, medical textbooks, and eBooks. Docu Care is an electronic health care system.

Dr. Stacey Van Gelderen, Dr. Angela Christian, and Brittany Frank, RN

Mission /Vision of Maverick Family

Our vision is to move the nursing profession to better care for the entire family. A family focused care approach will ultimately assist with healing and improving health outcomes. Partnering with DocuCare has the potential to change the mindset of professionals utilizing current EHR systems. This could be accomplished by the following:

- Integrating a genogram-ecomap model of care similar to Genopro, allowing nurses to holistically and efficiently assess the entire family unit. This could simply be done by adding a tab or page to the existing DocuCare EHR.
- Building an interactive family that can be introduced in the beginning of a nursing program and used throughout the curriculum. The scenarios range from the low fidelity case scenarios to the more advanced high fidelity simulations with complex scenarios as the student’s knowledge level evolves.
- Allowing exploration of family constructs and nursing interventions will facilitate development of superior communication and support for the entire family unit. Strategically placing family constructs throughout the curriculum will provide a multitude of opportunities for students to develop patient-family communication and assessment skills. This will increase the new graduate’s confidence and ability to work within most family dynamics, assist their needs, and empower families to care for one another.
- Providing a comprehensive system based on current evidence and sound educational principles allowing nurse educators to confidently and easily adapt the Maverick family scenarios to specific course outcomes without a significant amount of time, energy or simulation expertise.
- Serve as a change agent to lead health care organizations and individuals to integrate family genograms and ecomaps into the EHR system ultimately transforming health care from an individualized approach to holistic care of the entire family.
- Encouraging interprofessional collaboration by providing a forum for health care team members to coordinate and manage family health care needs.

Teaching Family Nursing Institute

Sandra K. Eggenberge; Kelly Krumwiede; Norma Krumwiede; Nancyruth Leibold; Mary Ann McKenna Moon; Colleen, Royle; Laura Schwarz; Patricia, Young; Stacey Van Gelderen

June 2-4, 2014

"Teaching Family Nursing Institute”, Minnesota State University, Mankato, Mankato, Minnesota, USA. Sponsored in conjunction with The Glen Taylor Nursing Institute for Family and Society. This institute is for all educators in the academic or health care setting who intend to move forward their teaching learning practices, including simulation pedagogies, in the area of family focused nursing. Contact: Lynn Kuechle, Coordinator, The Glen Taylor Nursing Institute for Family and Society, Minnesota State University, Mankato, School of Nursing (phone: 507-389-1165), email: lynn.kuechle@mnsu.edu website ahn.mnsu.edu/nursing/teachingfamily

Madelia Community Based Initiative

Kelly Krumwiede; Stacey Van Gelderen, Norma Krumwiede, Tai Gilbert and MCBC Partners

A variety of grants (e.g. State and federal) are being submitted to support the work of MCBC. Statewide Health Improvement Program (SHIP) was awarded 15,000 in funding to partner with MCBC on the campaign/policy change work to reduce sugar sweetened beverages in the community of Madelia. This demonstrates potential of the MCBC initiative.
Minnesota State University Mankato alum Dr. Peter Buerhaus, Vanderbilt University was a recent keynote speaker and consultant for the Glen Taylor Nursing Institute for Family and Society. During the consultation he offered support for the Institute exploring grant opportunity through Gordon and Betty Foundation. Dr. Buerhaus explored with Director Dr. Sandra Eggenberger and Coordinator, Lynn Kuechle, projects to support Institute initiatives that may align with the Gordon and Betty Moore Foundation. Dr. Buerhaus reassured the Institute of his support in setting a path and seeking funds from this Foundation.

As stated on their website, “They believe in bold ideas that create enduring impact in the areas of environmental conservation, patient care and science. Gordon and Betty Moore established the foundation to create this change around the world and at home in the San Francisco Bay Area. A main area of their work includes: Patient care focuses on eliminating preventable harms and unnecessary health care costs through meaningful engagement of patients and their families in a supportive, redesigned health care system. Another area is: Science looks for opportunities to transform—or even create—entire fields by investing in early-stage research, emerging fields and top research scientists.”
SUPPORT THE SCHOLARSHIP OF NURSING PRACTICE WITH EMPHASIS ON ADVANCING FAMILY AND SOCIETAL HEALTH: INSTITUTE SPONSORS INTERNATIONAL FAMILY NURSING CONFERENCE

The informative, exciting and groundbreaking 11th International Family Nursing Conference (IFNC) was held in Minnesota, June, 2013. IFNC was attended by over 400 participants from 28 countries. The official sponsor of the conference was the Glen Taylor Nursing Institute for Family and Society that has also provided support for formation of the International Family Nursing Association (IFNA). This conference was the first official meeting of IFNA, an organization whose mission is to foster the individual and collective development of nurses involved in the promotion of health care to families by providing a unique international forum of shared responsibility for the advance of family nursing. With support of the Institute 62 founding members of IFNA have now grown to more than 400 members who are dedicated to family nursing practice, research and education.

The choice of the theme, “Honoring the Past, Celebrating the Future” acknowledged family nurses who have collaborated for the last 25 years without a formal organization. This conference provided the opportunity to strengthen the infrastructure of the International Family Nursing Association as members formalized committees focused on education, practice, and research. From the strong participation at committee meetings it was evident that family nurses from around the world are keeping an eye to the future and planning innovative opportunities to advance family nursing and improve family health through IFNA. The IFNA infrastructure and governing processes were strengthened during the IFNC. Committee activities and structures that were initiated with the formation of IFNA in 2009 were formalized during this conference.

Conference keynote speakers included scholars in family nursing with 400 additional podium and poster presentations. Faculty, practitioners, and students presented projects, research, and advances in family nursing. A Glen Taylor Nursing Institute for Family and Society keynote lecture, “Ambiguous Loss, Resiliency, Not Closure” by Pauline Boss Ph.D. Emeritus University of Minnesota was well received. A significant number of presentations were offered by Minnesota State University Mankato and practice partners. School of Nursing (SON) faculty shared their knowledge in pre and post conferences, symposia, papers, and panel discussions. It was imperative for the Institute and SON faculty to have an impact at this conference to allow the international community to see leadership potential of the Institute and SON. Since this international conference would not return to the United States in near future it was important for the Institute to support faculty engagement in IFNC by: sharing our knowledge, engaging in collaborations, building capacity of faculty in scholarship, and strengthening sustainability of the Institute as global leader in family nursing. Therefore, the Institute supported faculty in their presentations in multiple ways, including Director consultation on projects, financial support for scholarship initiatives and dissemination, presentation of expertise, and attendance at this significant international conference. The Institute also connected with regional health care systems that partnered with the Institute to participate in the conference.

Minnesota State University Mankato faculty and students were vital to the success of this event. Initially, The Glen Taylor Nursing Institute for Family and Society wrote a proposal to the International Family Nursing Association Board of Directors that provided background on our Institute, the Minnesota region, the role of the School of Nursing and University in being leaders in family nursing for extended period of time. Dr. Sandra Eggenberger, Director of the Institute met IFNC Planning committee, and IFNA Board of Directors to explore the possibilities and opportunities of holding the Conference in Minnesota. The decision was made to hold the 2013 IFNC in Minneapolis, provide an opportunity for participants to travel to Minnesota State University Mankato, request School of Nursing faculty to provide a preconference to showcase our strengths in family nursing education, and identify the Glen Taylor Nursing Institute for Family and Society as the official IFNC sponsor.

A team of School of Nursing faculty offered both preconference and postconference workshops that were filled to near capacity. Dr. Sandra Eggenberger and Lynn Kuechle served as local planning committee members. The School of Nursing’s innovative approach to teaching family nursing and family simulations was recognized by the world as global leaders in family nursing education. A preconference provided an overview of how our undergraduate nursing curriculum integrates family-focused nursing care and uses high-fidelity simulations to develop family nursing practice. During postconference participants toured the School of Nursing and simulation center at Minnesota State University Mankato and participated in a family-focused high-fidelity simulation. Dinner at a local winery owned by School of Nursing alum provided time for networking and partnering. School of Nursing students served as gracious volunteers who welcomed others with a smile, information, and guidance. These stimulating events showcased to the world our strategies to teach effective family nursing practices. Evaluations are available in the appendix.

This conference drew international attention to Glen Taylor Nursing Institute for Family and Society and the School of Nursing at Minnesota State University Mankato as global leaders in family nursing. The event provided School of Nursing faculty with the opportunity to be recognized for their expertise in family nursing research, education and practice and develop collaborations and partnerships to support the health of families.
IFNC Faculty Presentations and Partnerships

Joyce Bredesen Podium Presentation “Using Photovoice Methodology to Give Voice to the Health Care Needs of Homeless Families” – (Becky Taylor Fellow)


Stacey Van Gelderen, Kelly Krumwiede, Norma Krumwiede Podium Presentation “Improving Health through Establishing Community Based Collaborative Partnerships”

Rebecca Wenthold, Sandra Eggenberger, Allina Health United Hospital, St. Paul, MN, USA, Minnesota State University, Mankato, MN, Podium Presentation “The Family Experience of Participating in an Intensive Care Unit (ICU) Support Group: Gaining Strength”

Ellen Wild, Cory Ingram, Mayo Clinic Health System, Mankato, MN, Podium Presentation “Therapeutic Conversations with Seriously Ill People and Their Families”

Marita Sanders, Laura Randgaard, Linda Reuber, Nancy Misurek, Fairview Ridges Hospital, Burnsville, MN, USA Poster Presentation “A Community Hospital’s Journey Toward True Partnership with Patients and Families”

Nancyruth Leibold, Laura Schwartz Podium Presentation “WebQuests in Family Nursing Education: The Learner’s Perspective”

Laurie Sieve, Tammy Neiman, Sandra Eggenberger, St. Catherine University, St. Paul, MN, USA, Minnesota State University, Mankato, MN, Podium Presentation “A Pilot Project Grounded in Family Nursing: Designing a Simulation in Behavioral Health Nursing”

Laura Schwartz, Kelly Krumwiede Poster Presentation “Integrating “Think Family” in the Curriculum of a RN-BS Program”

Laura Schwartz, Stacey Van Gelderen Poster Presentation “The Family Interview as a Method for Promoting “Think Family” in the RN Baccalaureate Completion Curriculum”

Hans-Peter De Ruiter Podium Presentation “Social Systems Theory: A Framework of Teaching Intercultural Family Mental Health Assessment Skills to Nursing Students in Austria and the United States”

Teaching Family-Focused Nursing Care Using Simulation Preconference

Angela Christian, DNP, RN; Stacey Van Gelderen, DNP, RN; Colleen Royle, MSN, RN; Mary Ann McKenna Moon, MSN, RN; Norma Krumwiede, EdD, RN; Patricia Young, PhD, RN; Sandra Eggenberger, PhD, RN. Supported by Paul Cusick, Director Technology CAHN

This preconference provided an overview of how undergraduate nursing curriculum integrates family-focuses nursing care using high fidelity simulations. Simulations incorporated family constructs and competences that guide student learning outcomes were demonstrated. Participants learned how simulations are effective tools to teach students to think family in their nursing practice.

Learning to Teach “Thinking Family” Using High-Fidelity Simulations Post Conference

Angela Christian, DNP, RN; Stacey Van Gelderen, DNP, RN; Colleen Royle, MSN, RN; Mary Ann McKenna Moon, MSN, RN; Norma Krumwiede, EdD, RN; Patricia Young, PhD, RN; Sandra Eggenberger, PhD, RN. Supported by Paul Cusick, Director Technology CAHN

Participants toured a comprehensive simulation center, had opportunity to participate in a family-focused high-fidelity simulation, and experienced a debriefing process with nursing faculty from Minnesota State University, Mankato who are experts in teaching simulation and family nursing. The post-conference sessions will showcase strategies to teach effective family nursing practices. Exemplars of simulation scenarios, teaching and evaluation tools were provided. Participants toured the site of The Glen Taylor Nursing Institute for Family and Society. Following the post-conference participants enjoyed a social event at the Chankaska Creek Ranch and Winery. The vineyard and winery sits on a creek in a rural setting of the Minnesota River Valley. A nurse alumnus from Minnesota State University Mankato owns the winery and is helping to support this event.
An International Family Systems Nursing Collaboration was formed with the support and expertise of the Institute. The Glen Taylor Nursing Institute for Family and Society helped to support this initiative with the Canadian Institute for Health Research. Minnesota State University, Mankato’s Glen Taylor Nursing Institute for Family and Society was invited to participate in an international conference in Montreal, Canada on Oct. 1-2, 2012 that discussed a global initiative focused on advancing family nursing practice. The intent of the event, titled the “International Family Systems Nursing Collaboration,” was to develop an international research agenda that will examine how family nursing can be more effectively implemented in practice settings around the world, said project facilitator Janice Bell, editor of the Journal of Family Nursing and a member of the Glen Taylor Nursing Institute Advisory Council. The Glen Taylor Nursing Institute for Family and Society then partnered with Hennepin County medical Center (HCMC) and Fairview Ridges Burnsville Hospital (FV Ridges) to engage in this research collaboration. HCMC and FV Ridges selected key practicing nurses and nurse leaders who had the enthusiasm, energy, and commitment to full engage in this research collaboration.

This International Family Systems Nursing Collaboration now includes 8 countries and has completed research project proposals that are being refined. Plans for implementation are underway. A second meeting in June 2013 at the International Family Nursing Conference strengthened the collaboration; researchers shared plans and further defined the international direction. Formal preparation for launching of the translational research project is underway at HCMC and FV Ridges. Faculty Dr. Marcia Stevens of the School of Nursing and Dr. Sandra Eggenberger are launching the research at HMC and FV Ridges by partnering with nurses from the practice setting. Appendix of media releases from Minnesota State University Mankato provided publicity and background on this initiative. Appendices include international project report by Dr. Fabie Duhamel and Dr. Dupuis, the international principal investigators reports overall project outcomes. Appendices also include the proposal by Dr. Eggenberger and Dr. Stevens currently in review at HCMC.

International Family Systems Nursing Collaboration participants formulate plan to advance family systems nursing practice. Nurse managers from HCMC in Minneapolis, Kelly White and Julie Sabo Research Director at HCMC and a clinical nurse specialist, Linda Reuber at Fairview Ridges Hospital in Burnsville, Minnesota also attended the event with Dr. Sandra Eggenberger and Lynn Kuechle of the Glen Taylor Nursing Institute for Family and Society. IN collaboration with principal investigators Dr. Eggenberger and Dr. Stevens, nurse managers, hospital researcher director and clinical nurse specialist are the knowledge users who will support translation of the research to the hospital setting.
The Institute links regional and international efforts through participation in and collaborations with the International Family Nursing Association and other organizations

The Institute has continued to engage in developing partnerships that would support the mission and purposes of the Institute. The International Family Nursing Association’s (IFNA) mission and purposes closely align with the Glen Taylor Nursing Institute for Family and Society. Therefore, the Institute continues to develop partnerships with organizations and health care systems that can advance the mission of IFNA and the Institute.

Partnerships at the regional and international level have continued to develop. A few of the partnerships developed in the last year included:

- International Family Nursing Conference sponsorship by hospitals such as Fairview Ridges Burnsville.
- Poster presentations at the International Family Nursing Conference by family nursing by leaders from Fairview Ridges Hospital, Burnsville, Minnesota
- Podium presentations at the International Family Nursing Conference by hospital staff from Mayo Health Care System, Mankato Minnesota.
- Poster and podium presentations regarding Madelia Community Based Collaboration and community health initiatives in Madelia, Minnesota.
- Interdisciplinary caregiving research in rural area of Mankato and Mankato, Minnesota.
- Launching of local and international research projects, such as Hennepin County Medical Center and Family Therapeutic Conversations: International Family Systems Knowledge Translation Research
LOCAL PARTNERSHIPS WITH GLEN TAYLOR NURSING INSTITUTE FOR FAMILY AND SOCIETY SUPPORT SCHOLARSHIP WITH EMPHASIS ON COMMUNITY HEALTH AND HEALING

The support of the Glen Taylor Nursing Institute for Family and Society and the leadership of School of Nursing faculty, Dr. Kelly Krumwiede, Dr. Norma Krumwiede, and Dr. Stacey Van Gelderen have resulted in the formation of a community based collaboration in the local community of Madelia. Taylor Visiting Scholars, Dr. Kit Chesla, Dr. Sharon Denham and Dr. Margaret Pharris, who have extensive expertise and experience in the area societal health, community partnership and community based action research projects have provided support as this initiative developed. These Visiting Scholars continue to support the efforts of this partnership. Students in the School of Nursing who are enrolled in courses with a community / population focus collected initial data indicating community health concerns and strengths and continue to engage in initiatives. School of Nursing faculty guided this data collection process. Students then presented the results of this community health assessment in 2012. Media releases resulted in a variety of interested parties and stakeholders in the community at this event. An interdisciplinary team of faculty, students, the Madelia Hospital and Clinic, regional community health stakeholders have now formed a partnership with the Madelia Community. Several community events and initiatives occurred because of this Madelia Community Based Collaborative (MCBC). The goal is to continue these efforts of forming and implementing a community based action research project and community partnership dedicated to a healthy community. The mission vision statement of MCBC provides additional background about this partnership and initiative. The Annual Report of the Madelia Community Based Collaborative shares particular outcomes of this initiative. (See Appendices)

Madelia Community Based Collaborative

Mission Vision Statement

The purpose of the Madelia Community Based Collaborative (MCBC) is to enhance health, improve the quality of life, and empower Madelia community members.

MCBC is in partnership with community members to help improve the environment in which people live, work, and play. With everyone’s involvement, we can make a difference

Madelia Community Based Collaborative Annual Report

Summer 2012

- Initial community needs assessment report written
- Identified two key groups that needed further assessment
  - Those between the ages of 25-50
  - Families with toddlers and preschoolers

Fall 2012

- Focus groups were used to verify data/findings in the initial community needs assessment
- Two additional populations were assessed: 25-50 year olds and families with toddlers and preschoolers
- MCBC Mission and Vision Statements were developed and approved
- Community Forum was held to report findings to the community
  - Media was used to advertise the forum
  - Posters and flyers were distributive to local businesses and churches
  - TMT bus transportation was provided to those in need
  - Invitations were sent out with puzzle pieces to highlight the community of Madelia
Consultant: Dr. Margaret Dexheimer Pharris attended community forum
Community members continued the discussion regarding the community needs assessment findings

- Four Big Ideas were identified
  - Madelia Healthy Family Event – Healthy cooking; exercise with a guest speaker
  - Data Collection and Analysis
  - Health Promotion Videos – Public Service Announcements

Spring 2013
- Solicited interprofessional with future events through the College of Allied Health and Nursing Leadership Team
- Madelia Healthy Family Event
  - Zumba Classes
  - Healthy Cooking (recipes & hands-on cooking demonstrations)
    - Easy Hummus Dip
    - Fruit and Yogurt Smoothie
    - Avocado-Corn Salsa
  - International Speaker on Latino Women’s Health & Diabetes Education –
    - Dr. Jeanette Noltenius (presented in both English & Spanish)
  - Height/weight/blood pressure/BMI stations with health counseling
- Public Service Announcements
  - Campaign idea identified – ‘Commit to Get Fit’
  - PSA ideas were identified
  - T-shirt fund raising idea was identified but not implemented
- Data Collection and Analysis
  - Needs were identified
- Submitted Robert Wood Johnson Foundation concept paper on increasing water consumption within the Madelia Area School students (was not called to submit full grant)

Summer 2013
- Madelia Community Hospital and Clinic submitted official community health needs assessment report
- Public Service Announcements were developed
  - Audio for radio stations (English and Spanish versions)
  - Video for public TV stations and TV screens at local businesses
- Data collection surveys were developed and implemented at Madelia Park Days the River Run event
- Presentations:
  - Association of Community Health Nurse Educators/American Public Health Nurses Joint Meeting; June, 2013
    - Community-Based Collaborative Action Research, Service Learning and Community Needs Assessment- poster
      - Kelly Krumwiede PhD, RN; Stacey Van Gelderen DNP, RN, Norma Krumwiede EdD, RN; Donna Erickson PHN, RN
    - Service Learning: Conducting a Community Health Needs Assessment
    - Kelly Krumwiede PhD, RN; Stacey Van Gelderen DNP, RN, Norma Krumwiede EdD, RN; Donna Erickson PHN, RN
  - International Family Nursing Association Conference; June, 2013
    - Improving Family Health Through Establishing Community Based Collaborative Partnerships- podium
      - Stacey Van Gelderen DNP, RN, Kelly Krumwiede PhD, RN; Norma Krumwiede EdD, RN
  - Accepted for presentation at American Public Health Association Annual Meeting (November 2013)
    - Community Partnerships Supporting Societal Health-podium
      - Kelly Krumwiede PhD, RN; Stacey Van Gelderen DNP, RN, Tai Gilbert, DNP, RN; Norma Krumwiede EdD, RN
- Applied for State Health Improvement Program (SHIP) grant to make environmental, policy and system changes within the community of Madelia (focus will be on reducing access to sugary beverages and increasing access to water to improve family and societal health)
VISITING SCHOLARS COLLABORATE WITH STUDENTS AND FACULTY TO ENHANCE UNDERSTANDINGS OF FAMILY AND SOCIETAL HEALTH AND NURTURE AN INTELLECTUAL COMMUNITY OF SCHOLARS

Taylor Visiting Scholars continued to bring expertise to Minnesota State University Mankato throughout the year and work with students and faculty to further their understanding of family and societal health concerns and advance specific areas of research and practice. The strategic plan called for a direction of the Institute to strengthen presence in the communities. In recent years the Director and School of Nursing faculty identified particular experts who could support this plan.

Sharon Denham, DSN, RN served in the Visiting Scholar role in 2012. Dr. Denham is Professor Emerita at Ohio University’s School of Nursing. She is Project Director at the Center for Appalachian Philanthropy for a CDC funded project called Strengthening Communities to Prevent Diabetes in Rural Appalachia. Dr. Denham has a resume of extensive experience and accomplishments in teaching, conducting research and creating community partnerships. A main thrust of her scholarship has been the development of a culturally sensitive and family-focused program and toolkit entitled Diabetes: A Family Matter. This Toolkit focuses on diabetes from the family perspective and provides information, activities, and media geared towards not only those suffering from diabetes, but also their families, friends, and communities. Her textbook, Family Health: A Framework for Nursing, as well as publications related to her program of research, practice models, and access to care are used in numerous graduate and undergraduate nursing curricula throughout the country.

Dr. Denham’s recent activities as a Visiting Scholar for The Glen Taylor Nursing Institute for Family and Society included:

- Collaborating with faculty from the School of Nursing who are editors of a textbook, Family-Focused Nursing Care being written by School of Nursing faculty and colleagues. Editors are Dr. Sharon Denham, Dr. Sandra Eggenberger, Dr. Norma Krumwiede and Dr. Patricia Young with F. A. Davis Company, a leading nursing textbook publisher. This fifteen chapter textbook with a four chapter instructor manual has now been submitted to FA Davis for peer reviews of each chapter. Dr. Denham has been the leader, mentor, and coach in completing this project.

- Consulting with Fairview Ridges Burnsville Hospital Nurse Leadership team about strategies to enhance family focused care. A site assessment resulted in a plan for numerous environmental, policy, and practice changes to support family focused care. The leadership team continues to address their work with Dr. Denham in their nursing research, hospital committees focused on increasing attention to family-nurse-team partnerships, and policy development.

- Consulting with Mayo Health System staff about ways family nursing care is being further developed in their facility. Dr. Sharon Denham and Dr. Sandra Eggenberger provided presentations that focused on evidence related to family health and family nursing practices.

- Providing presentations in Madelia in the community and consultation to Madelia Hospital and Clinics (MCHC). Her community presentation focused on diabetes prevention and healthy lifestyle. Dr. Denham’s consultation with the staff at MCHC addressed their efforts to enhance family focused care. Nursing staff and administration discussed how MCHC delivers patient care and how families can be fully placed in the center of care practices. The leadership staff at MCHC welcomed community partnerships and explored ways to strengthen a community partnership with the Glen Taylor Nursing Institute for Family and Society and faculty and students from Minnesota State University Mankato. The consultative support of Visiting Scholars and the Minnesota State University Mankato team of Dr. Norma Krumwiede, Dr. Sandra Eggenberger and Dr. Kelly Krumwiede, among other faculty, is a valuable tool in achieving family focused nursing care and community partnerships at MCHC.
Margaret Dexheimer Pharris PhD, RN, FAAN, Graduate Programs Director at St. Catherine University in St. Paul, Minnesota served as a Visiting Scholar with expertise in Community-Based Collaborative Action Research and community based projects. Dr. Pharris text, *Community-Based Collaborative Action Research: A Nursing Approach* published in 2012 is currently a leading textbook in nursing that describes current research methods related to community-based collaboration. Dr. Pharris’ experience in community-based collaborative action research (CBCAR) to demonstrate how nursing and other health care practitioners, leaders, and scholars can transform communities by identifying and addressing systemic and structural barriers to health and well-being. This text and Dr. Pharris’ expertise continues to serve as an expert resource to faculty in the School of Nursing who are guiding such projects with the support of the Institute. Her recent Community-Based Collaborative Action Research in the Harrison Neighborhood of North Minneapolis is a collaborative project involved a “reverse health affair” in which the community informed the Redeemer Health Ministry Team and the Fairview foundation on what an effective health ministry looks like in this multiethnic inner-city community. She has also conducted quantitative and qualitative research evaluating the experience of African American females participating in racism and health forums, as well as community based collaborative action research process to understand the experience of Hmong and African American women living with diabetes and then engaging the wider community in action planning.

Dr. Pharris recent activities included:

- Providing a presentation to School of Nursing faculty outlining Community-Based Collaborative Action research Method
- Consulting with specific School of Nursing faculty on approach to developing an action plan that addresses a local community health concerns
- Attending an undergraduate student and faculty presentation related to data collection regarding local community health strengths, resources, barriers, and concerns
- This Visiting Scholar among others, and the Institute supported the creation of a community partnership.
- Providing knowledge that informed the development of the Madelia Community Based Collaborative (MCBC). This collaborative community effort is actively engaging in numerous initiatives to improve the health of Madelia family and community. MCBC includes the Madelia Hospital and Clinic and a variety of community focused health systems and representatives of the community that can assist with interpretation, needs identification, and implementation of community focused projects. This MCBC is being co-led by School of Nursing faculty, Dr. Kelly Krumwiede and Dr. Stacey VanGelderen. The purpose of the Madelia Community Based Collaborative (MCBC) is to enhance health, improve the quality of life, and empower Madelia community members. Mission and Vision of MCBC include a partnership with community members to help improve the environment in which people live, work, and play. With everyone’s involvement, we can make a difference. The first Healthy Family Event was held in spring of 2013. Other outcomes were identified in the prior Madelia Community Based Collaborative Annual Report on pages 10 and 11 of this annual report.
Dr. Sonja J. Meiers served as the keynote presenter at the co-sponsored event with Sigma Theta Tau International and Glen Taylor Nursing Institute for Family and Society. Dr. Meiers is Graduate Programs Director and Professor at Winona State University Minnesota. She is a principal investigator of a National Institute for Health community project with Rochester Mayo Hospital Systems and Rochester community partners. The focus of her presentation was their community based collaborative research project.

Past Institute forums, conferences, and events focused on family and family nursing practice; therefore, a deliberate effort was made in the last year to focus on community and society with this year’s events. Dr. Sonja Meiers was the keynote Fall Forum of 2012.
BECKY TAYLOR FELLOWSHIPS SUPPORT RESEARCH AND SCHOLARSHIP OF DOCTOR OF NURSING PRACTICE STUDENTS IN AREAS OF CONCERN RELATED TO FAMILY AND SOCIETAL HEALTH

The Becky Taylor Fellowships continue to support doctoral student scholarship in the areas of family and societal health and help create an environment where family and societal research and scholarship are valued and encouraged. Two Becky Taylor Fellowship recipients graduate in May 2012.

**Rhonda Bender, RN, DNP, FNP-BC** from Bagley Minnesota was named a Becky Taylor Fellow for fall of 2011 and graduate with a Doctor of Nursing Practice degree in May 2012.

*Impact of Adopting Guidelines Supporting Family Presence During Resuscitation on a Rural Midwestern Medical Center*

The purpose of Dr. Rhonda Bender’s project was to adopt clinical practice guidelines supporting the option of FPDR based on written institutional policy and staff education. Her study sought to answer the clinical question - In a rural Midwestern medical center, how does adoption of a written policy and staff education supporting FPDR based on current evidence impact (a) nurses’ perceptions of risks and benefits of FPDR measured pre/post-education using the Family Presence Risk-Benefit Scale (FPR-BS), (b) nurses’ report of self-confidence in skills needed for facilitating family centered support during resuscitation measured pre/post-education using the Family Presence Self-confidence Scale (FPS-CS), and (c) the clinical practice of FPDR measured retrospectively by chart review two months pre-intervention, two months during intervention, and two months post-intervention, compared to current practice (no current policy, no staff education, and inconsistent clinical practice of FPDR).

Dr. Rhonda Bender has recently accepted an adjunct professor who is teaching nursing while she also assumes her fulltime role as an education coordinator at Sanford Health Systems. Becky Taylor Fellow Dr. Rhonda Bender and her faculty advisors Dr. Sue Ellen Bell and Dr. Sandra Kay Eggenberger submitted a manuscript for review to the Journal of Family Nursing in September, 2013. The manuscript is based upon her doctoral work and capstone project. Additional manuscripts are currently being planned.

**Laurel Ostrow, RN, DNP** from Minneapolis, Minnesota was named a Becky Taylor Fellow in 2011 and graduated with a Doctor of Nursing Practice degree in May 2012.

*Effect of Narrative Therapy on Elder Depression and Carer Stress in a Sample of Elders with Dementia*

The purpose of this project was to evaluate the impact a narrative therapy intervention has on the variables of depression and stress among people with dementia and depression and their caregivers. The relationship between depression and dementia is a subject of great interest to clinicians and researchers. The project hopes to understand more about the relationship between these two clinical concerns through the initial screening for depression and then again after the narrative therapy intervention. The possibility that narrative therapy relieves...
depression and creates a sense of increased meaning in life among cognitively impaired and depressed elders is the primary subject of the investigation.

Becky Taylor Fellows and Becky Taylor Connections

Becky Taylor continues to maintain relationship with Becky Taylor Fellow recipients. Becky values the opportunity to meet the students when they are awarded the fellowship. At the end of this competitive review process, this provides the Becky Taylor Fellows and Becky Taylor to celebrate the award and fellowship gift. At the time of graduate Becky Taylor also appreciates the chance to meet with President Davenport, the Becky Taylor Fellows and guests, Dean of College of Allied health an Nursing and Director of the Glen Taylor Nursing Institute for Family and Society to hear a presentation about their capstone projects, learn about the benefits of the fellowship funds and students’ plans for the future, and hear their presentations and review their posters.
FACULTY ENGAGED IN THE INSTITUTE TRANSLATE KNOWLEDGE FOR THE PURPOSE OF ADVANCING PRACTICE & IMPROVING HEALTH

The Glen Taylor Nursing Institute for Family and Society supported faculty scholarship in the area of family and societal health by partially funding peer-reviewed research projects and proposals, providing a network of consultants/scholars to guide faculty scholarship, and lending support for faculty scholarship. A variety of faculty proposals to plan and implement family and societal research, participate in educational conferences that would enhance their family and societal scholarship, and launch nursing practice projects that use evidence to support optimal family and community nursing practice were supported in 2012-2013.

Dr. Hans Peter de Ruiter

Transforming Caring into Bytes: A Study Examining the Process and Work of Collecting and Managing Nursing Care Data

The organizational benefits of using data collected in the electronic health record (EHR) are well documented, yet few studies have illuminated the process, beginning from data collection at the bedside through the chain of related work within healthcare institutions. The purpose of this research is to understand how bedside care is transformed into data and how these data join a chain of activities within the institution. This study is performed as an Institutional Ethnography, a research approach focused on the social organization of work in complex institutions. Data collection included 8 focus groups, 28 interviews and the collection of institutional documents. This study shows that the EHR format foreclosed opportunities to communicate information about skilled practices and decisions, yet encouraged entry of concrete data points about patients and nursing care. Data from patient records were elsewhere gathered and aggregated as statistics to help support institutional objectives. This study illustrates how the EHR has added a data-entry function to bedside nursing work, which is part of a coordinate chain of institutional activity that changes how nursing care is understood by nurses and other professionals.

Dr. Stacey Van Gelderen and Dr. Angela Christian

The Maverick Family Project Description

The nursing profession can play a key role in improving health outcomes by adapting the manner in which education is delivered to nursing students. It is necessary for nursing education to shift the focus of care delivery from the individual to the entire family unit. The Maverick Family project will facilitate this educational evolution through the development of a standardized family that can be utilized through the entire nursing curriculum. This standardized family will have intentional placement of various medical conditions, psychological concerns and family constructs within different healthcare settings. This will allow School of Nursing educators and students to focus on the family through experiences that occur across the lifespan. Appendices include additional evidence of the mission and vision of this project.

Dr. Marcia Stevens

Parenting an Adolescent with Trichotillomania (Hair Pulling Disorder)

Given the cognitive development and information processing changes that occur during adolescence, parenting an adolescent is challenging in the best of circumstances. However, when a teenage son or daughter is observed to pull hair from the scalp, eyebrows or pubic area for unknown reasons, parenting can be overwhelming! Although this disorder affects 2-5% of the public and most often begins in pre-adolescence, parents seeking information find that few professionals have current knowledge about possible causes or effective treatment. Parents frequently blame themselves and wonder what actions they should take regarding their teenager’s pulling behavior. Inconsistent treatment outcomes and pulling relapses may cause parents to lose hope in a successful outcome for their efforts. Dr. Marcia Stevens is conducting a descriptive correlational study to explore the experience of parenting an adolescent with Trichotillomania. The purposes of this study are to investigate what parents describe as stressful about parenting an adolescent with trichotillomania; identify the responses and strategies parents use to manage stressful encounters with
their adolescent; identify the meaning of hope for parents and determine the influence of parent characteristics and adolescent characteristics on level of hope. An on-line Internet-based method of data collection will be used to access a convenience sample of 30 adults. An invitation to the study is posted on the Trichotillomania Learning Center (Santa Cruz, California) website at http://ww.trich.org/

Dr. Nancyruth Leibold and Dr. Laura Schwarz

Using WebQuests to Teach Family Nursing

As nurse educators, Dr. Nancyruth Leibold and Dr. Laura Schwarz recognize the worth of using WebQuests to teach Family Nursing. They also value the importance of providing evidence-based, state of the art technological learning experiences for nursing students. WebQuests are webpages that are a teaching/learning strategy with specific instructional design to prompt higher order thinking, including discovery and inquiry in learners. Born out of constructivist framework, WebQuests provide opportunities for learners to apply and analyze information, resulting in building knowledge.

Dr. Leibold and Dr. Schwarz wanted to study the use of WebQuests as a teaching/learning strategy. They conducted a mixed methods research study to discover the learner’s perception of the use of this innovative and technological teaching strategy. A majority of study participants reported favorable use of the Family Nursing WebQuests. High scores were given to organization, ease of use, allowing one to learn at their own pace, encouraging reflective thinking and thinking about interacting with patients and families and family nursing interventions.

Valuable information was discovered for nurse educators regarding what is effective in the WebQuest design for family nursing learners. Areas for improvement were identified so that nurse educators can improve WebQuest use in Family Nursing Education. Further study and use of WebQuests in Family Nursing Education is recommended. More about WebQuests can be found at http://questgarden.com/

Dr. Sandra K. Eggenberger and Dr. Marcia Stevens

Short Term Therapeutic Family Conversation Investigation: International Family Systems Nursing Collaboration

Translating

Attending to the complex physiological needs of critically care patients in busy critical care settings can be challenging for the most experienced nurses. Family members of these hospitalized patients also experience emotional distress, conflicts, uncertainties, and difficulties coping. Communicating with family members to minimize distress and provide the information and emotional support they need to manage the experience and support their critically ill family member can be difficult for nurses in this setting. Yet, medical and nurse researchers report nurse-family communication has potential to influence patient and family health in the critical care setting.

Communication with families that acknowledge the family distress and complex environment, commend family strengths, and address family concerns have been found to develop trust, increase family satisfaction with care, support family coping, and improve patient and family health outcomes in critical care settings. Even brief communication with a nurse can be meaningful and supportive to families during the stress and demands of an illness experience in the hospital setting. This meaningful and purposeful communication can occur through the use of a “short-term therapeutic family conversation” based on family systems theory (Wright & Bell, 2010; Wright & Leahey, 2013; Svavarsdottir, Tryggvadottir, & Sigurardottir, 2012).

The purpose of this study is to evaluate if an educational program designed to teach and strengthen SICU staff nurses knowledge and skill in the use of a “Short-Term Therapeutic Family Conversation” has an impact on family satisfaction with care and staff nurse perceptions about their family nursing practice. Study design is a pre and post-test non-equivalent comparison groups. The initial plan for the educational program includes a four hour on-site didactic with a role play practice opportunity. The estimated duration of the study is approximately one year. Study measures focus on family satisfaction, family nursing practice, and family comfort. Appendices include a proposal that is currently being reviewed by Hennepin County Medical Center.
Development of Family Focused Nursing Education Materials and Strategies

Angela Christian, DNP, RN; Sandra Eggenberger, PhD, RN; Stacey Van Gelderen, DNP, RN; Norma Krumwiede, EdD, RN; Mary Ann McKenna Moon, MSN, RN; Nancy Miller, RN; Colleen Royle, MSN, RN; Patricia Young, PhD, RN

School of Nursing faculty who have expertise in family nursing practice and family nursing education received the support of the Institute to write, develop, and produce videotapes demonstrating simulation experiences. The videos were written to illustrate the demands and stresses of the family illness experience and impact of family nursing practice that was present and absent. Simulation was selected as to demonstrate the impact of family nursing care during an illness experience because of the current focus in nursing education on simulation pedagogy. Students played the role of family members and nurses with the use of scripts written by faculty. Simulation experiences allowed faculty to illustrate usual and complex patient and family experiences during hospitalization with an illness. Scripts developed by faculty were used to create a video demonstrated nursing practice that is solely patient focused and a second video that is family focused. Family constructs related to illness, family focused care, and family nursing were embedded throughout each of the videos. Student-faculty debriefing and reflections were also taped to support analysis and exploration of simulation, family illness experience and nursing practice.

Both videos were used as part of the International Family Nursing Conference. These videos were evaluated as effective teaching strategies by presenters and participants. Videos are now being used in various courses of the undergraduate curricula. Plans are to use the videos in a Teaching Family Nursing Institute being planned for summer 2014.

Family Focused Textbook Authorship

A number of School of Nursing faculty and other family experts collaborated to author a textbook that is family-focused. The textbook aims to guide faculty and students in advancing family nursing practice through innovative approaches to nursing education. Taylor Visiting Scholar, Dr. Sharon Denham collaborated with School of Nursing Faculty to write a textbook focused on family focused care and nursing practice. All fifteen chapters of the text and five chapters of the instructor manual have been submitted to FA Davis publishers. Chapters are now under review. See Appendix for the book prospectus. (See Appendix)
INFLUENCING NURSING EDUCATION THROUGH THE CREATING OF THE MAVERICK FAMILY DOCU CARE ELECTRONIC HEALTH RECORD

Dr. Stacey Van Gelderen, Dr. Angela Christian, and Brittany Frank, RN

The Glen Taylor Nursing Institute for Family and Society has provided some financial support for the faculty launching this project. The Institute is now working with University experts to negotiate a partnership with Lippincott company to offer cases for simulation that could transform the approach to nursing education using high fidelity simulation and the electronic health records to focus on family nursing and family health. A goal is to provide financial support for the Institute and faculty as they influence nursing education. Faculty wrote the following vision statement to guide their direction:
CAREGIVING IN AMERICA MAGAZINE PROMOTES THE INSTITUTE AND MEETS THE NEEDS OF CAREGIVING FAMILIES

The third issue of Caregiving in America Magazine has been distributed. The market for this magazine is caregivers, including family members of individuals with an illness. The Glen Taylor Nursing Institute for Family and Society has received a full page sponsorship in each of the four (4) publications with use of the name and logo of the Institute.

Becky Taylor was featured in one of the issues as a nurse who has been a caregiver and working to give back to others. Becky’s experience and expertise as a nurse and family member of an ill individual portrayed the Taylors’ efforts to support family members and nursing practice.

Family nursing scholars from the School of Nursing at Minnesota State University have been featured with a description of their research related to caregiving, family health concerns, and family nursing. This article highlighted the significance of scholarship at Minnesota State University, Mankato and the importance of family nursing research in the creation of the Institute.

Included in each issue of the publication is a section titled “Ask A Nurse” where families ask questions. A representative of the Glen Taylor Nursing Institute for Family and Society determines the expert who will respond to the question.

Articles and responses to questions have included the following:

- Autism: Ask an Expert by Nancy McLoone RN MS CPNP, Assistant Professor, MNSU Mankato
- Starting the Caregiving Conversations: Diane Witt, RN, PhD, Assistant Professor, MNSU, Mankato
Appendix

Appendices Related to Promotional Activities of 2012-13

Big Ideas, Real-World Thinking Focuses on Family Nursing Practice

The Institute’s focus on families and nursing practice in faculty scholarship and nursing education was featured as a Big ideas, Real-world thinking campaign at Minnesota State University, Mankato (MSUM). This campaign was part of the media relations in Twin cities that brought notoriety to mission of the Institute and a focus of the SON. This campaign also became the central point of the Glen Taylor Nursing Institute for Family and Society web redesign.

Midwest Nursing Research Society Exhibition

For the first time the Institute had an exhibit the Midwest Nursing Research Society in Chicago, 2013. With more than 1,300 members, MNRS is one of the largest and most influential nursing research organizations in the country, serving individuals in a 13-state Midwest region.
Staff from Glen Taylor Nursing Institute for Family and Society to attend October 1-2 International Conference, Assist in Global Initiatives to Advance Family Nursing

Mankato, Minn. – Minnesota State University, Mankato’s Glen Taylor Nursing Institute for Family and Society has been invited to participate in an international conference in Montreal, Canada on Oct. 1-2 that will discuss a global initiative focused on advancing family nursing practice.

The intent of the conference, titled the “International Family Systems Nursing Collaboration,” is to develop an international research agenda that will examine how family nursing can be more effectively implemented in practice settings around the world, said project facilitator Janice Bell, editor of the Journal of Family Nursing and a member of the Glen Taylor Nursing Institute Advisory Council.

Researchers and knowledge-users from six countries (Canada, Iceland, Japan, Sweden, Thailand, USA) have been invited to attend the conference, which is funded by the Canadian Institutes for Health Research (CIHR). The Glen Taylor Nursing Institute for Family and Society is the sole participant from the United States invited to be part of this research effort.

Presenters at the conference will share the latest research results related to family nursing knowledge and translation from their respective counties. They will also clarify and reach a consensus on the “family nursing knowledge” to be translated in practice for the research project and how each country will contribute to the project.

“This invitation provides the Institute with a unique opportunity to join forces with international colleagues who are also committed to advancing nursing practice with families,” said Sandra Eggenberger, director of the Institute. “A significant part of the Institute’s mission is to form partnerships that improve the health of society and families. This academic-practice collaboration will encourage users of this knowledge in the hospital setting to become a vital component of the research group and effect positive change.”

Joining Eggenberger at the conference will be Marcia Stevens, a professor in Minnesota State Mankato’s School of Nursing, and Lynn Kuechle, coordinator for the Glen Taylor Nursing Institute for Family and Society. Also attending the conference will be two medical personnel from Hennepin County Medical Center in Minneapolis and a clinical nurse specialist in oncology at Fairview Ridges Hospital in Burnsville, Minn. Eggenberger said that Mayo Health Systems in Mankato will play a crucial role in sharing the research plan.
The conference will be led by Dr. Fabie Duhamel, principal investigator and professor at the University of Montreal. Duhamel wrote a proposal to hold the conference that was titled “Partnering to Advance the Practice of Family Nursing in Health Care Services: An International Research Collaboration.”

In her proposal, Duhamel wrote: “That Family Nursing would someday be offered as ‘usual nursing care’ around the world is the guiding vision for the proposal.”

The Glen Taylor Nursing Institute for Family and Society was established as the result of a $7 million pledge in 2008 by Glen and Becky Taylor that allowed Minnesota State Mankato’s School of Nursing to establish the Institute, create an endowed faculty chair and provide doctoral fellowships in nursing.

The Glen Taylor Nursing Institute for Family and Society along with Minnesota State Mankato faculty and staff will be instrumental in the planning of the 2013 International Family Nursing Conference, which will be held from June 19-22 at the Hyatt Regency Minneapolis. The 2011 International Family Nursing Conference, held in Kyoto, Japan, had more than 1,000 participants from 34 countries.

For more information about the conference and other activities of the Glen Taylor Nursing Institute for Family and Society, please contact Sandra Eggenberger by phone at 507-389-6821 or by email at sandra.eggenberger@mnsu.edu.

Minnesota State Mankato, a comprehensive university, is part of the Minnesota State Colleges & Universities system, a system of 31 public colleges and universities with 54 campuses in 47 communities throughout the state of Minnesota.
FOR IMMEDIATE RELEASE: November 26, 2012

COMMUNITY HEALTH ASSESSMENT RESULTS PRESENTATION

Madelia, MN - The results of the Madelia Community Health Assessment Survey will be presented to the public at 10:30 a.m. on Tuesday, December 4th at the Trinity Lutheran Church in Madelia. Everyone is welcome to attend.

The Health and Well-Being of our Community is a Complex Puzzle and it is our mission to meet the needs of our community. Madelia Community Hospital & Clinic has partnered with the Glen Taylor Nursing Institute for Family and Society at Minnesota State University-Mankato to ensure the needs of the community are addressed. The survey was completed this month by the nursing students at MN State-Mankato and they will present their findings of the 2012 Health assessment survey.

The Madelia Community Based Collaborative (MCBC) is partnering with community members to help improve the environment in which people live, work, and play. Information from the health assessment survey will be used to help identify the current and future needs of the residents of Madelia. The purpose of the MCBC is to enhance health, improve the quality of life, and empower Madelia community members.

Be a part of the puzzle and come to the presentation on December 4th at 10:30am. For those that need a ride the TMT bus is available. Madelia residents can arrange transportation and by making a reservation by calling 642-3255 or stopping by the Hospital Front Desk.
Hi Kelly, Stacey and Ellen,

I am pleased to inform you that our agency was awarded the funding to partner with MCBC on the campaign/policy change work to reduce sugar sweetened beverages in the community of Madelia. The funding allows for internal SHIP staff to help work on the changes, includes funding for our evaluators, The Improve Group, to complete required MDH evaluation activities related to the project. The project includes a total budget of $15,000 to allocate towards implementation efforts, such as paid advertisements, providing small grant amounts to help with environmental changes or incentives for changing organizational policy. According to our action plan outlined in the grant, one of our first steps will be to develop a site recruitment process to identify sites interested in reducing access to sugary beverages and then complete site-specific assessments of current practices within their organization. We should be able to pull from tools used in Boston and other places. Lia Lambert is our staff person who will be assigned to work with MCBC on this project. She is a grad student from MSU Community Health who is finishing up her degree this year. I will also be able to help provide some guidance on the project, however please note I will be on maternity leave from end of March/April – July.

The funding is slated to begin November 1, 2013 and goes through October 31, 2015. MDH will be scheduling a call with our agency to review the grant application and provided any feedback and requested changes they may have to our work plan. In reviewing the strengths and weaknesses provided from the external review process conducted by MDH, it was stated that “This project is possibly one of the best we reviewed, utilizes an evidence-based approach tried by other communities such as Boston.” A weakness was “There was no budget provided for how they will utilize the $15,000 – they may be underestimating the cost of paid media.”

In addition, we also received our normal SHIP grant, an additional innovative grant to implement a Healthy Senior Project in Martin County.

My hope is to make it to the MCBC meeting tomorrow. Given the heavy workload I have right now with getting revisions made to the grants, reviewing SHIP mini-grants and committee meetings, it might not be possible. I cc’d Lia as well- she teaches at MSU also so it depends on what her schedule can allow.

Thanks! We are so excited to work with you!
Chera

Chera Sevcik, MS
Supervisor
Statewide Health Improvement Program (SHIP)
Cottonwood, Jackson, Faribault, Martin & Watonwan Counties
115 W. First Street
Fairmont, MN 56031
507.236.5376 (Phone)
507.238.1574 (Fax)
Appendix

MCBC supports local partnership initiatives of the Institute

Madelia Community Healthy Family Event

Thursday, March 14th at Madelia High School

Featuring...

Dr. Jeannette Noltenius
National known speaker in the field of healthy living. She will provide information about how to make lifestyle changes to prevent weight gain and obesity.

In English from 4:30-5:30 p.m., Spanish from 5:45-6:45 p.m.

Also...

Healthy Cooking in the Home Ec Room 3:30-5:30 p.m.
New healthy snack ideas! Hands-on presentation of the benefits of healthy eating. Prepare and sample your very own healthy snacks!

Zumba in the Cafeteria from 3:30-5:30 p.m.
Fun, exhilarating, easy-to-follow, dance fitness party!

This event is made possible through the collaboration of Madelia High School, The Glen Taylor Nursing Institute for Family and Society, and the Madelia Community Hospital & Clinic.

Madelia Community Hospital Foundation Scholarships
Applications are being accepted for two $500 scholarships for Madelia-area high school seniors pursuing a career in healthcare.

Scholarship packets are available at the Madelia High School counselor’s office, the Madelia Community Hospital & Clinic front desk, or at www.mchospital.org.

Application Deadline: Monday, April 22nd, 2013 at 3 p.m.

Madelia Community Hospital
121 Drew Ave SE, Madelia
www.mchospital.org
Appendix

Partnership Appendices provide evidence of Institute linking regional and international efforts

Dear Friend of the Glen Taylor Institute:

We would like to present an opportunity for you and your organization to become more involved in the International Family Nursing Association (IFNA). Officially incorporated in 2008, IFNA formalizes over 25 years of grass-roots work and leadership worldwide to foster the individual and collective development of nurses who promote health care to families across the lifespan through research, practice, and education.

I am pleased to announce that The Glen Taylor Institute for Family and Society at Minnesota State University, Mankato, is the official sponsor of the 11th International Family Nursing Conference, “Honoring the Past, Celebrating the Future”, June 19-22, 2013, Minneapolis, Minnesota, USA. This conference will be the first official meeting of IFNA as a formal organization. Known for your substantial support of family nursing in the past, we encourage your participation through sponsorship or exhibiting opportunities at this international conference.

Here are just a few highlights of why The Glen Taylor Institute supports this organization:

1. IFNA is a global community of nurse scholars and practitioners who represent 16 countries and care about the health and healing of families.

2. IFNA members are dedicated to the creation and exchange of NEW theory, research, practice, education, and policy about families and the nursing of families.

3. IFNA members have unprecedented opportunities for collaboration with colleagues around the world who share a passion for family nursing research, practice, education, and theory.

4. Social networking opportunities through the IFNA website and Twitter provide members with an opportunity to communicate directly with one another, share ideas and resources, and learn from each other.

5. Bi-annual international meetings provide opportunities for networking and exchanging new knowledge.

6. New learning modalities such as webinars allow members to access expertise and consultation in family nursing research, practice, and education.

As Chair of the Local Planning Committee, we are personally committed to IFNA and believe your support will benefit your students and faculty by providing a forum for learning, networking, and presenting their scholarly work. Thank you for considering this request for support. Please feel free to contact us with questions or to discuss possibilities for support. Information about IFNA and its educational programming and nursing resources can be found at www.internationalfamilynursing.org.

Sincerely,

[Signature]

www.internationalfamilynursing.org
Appendix

Appendices Related to Faculty Scholarship of Nursing Practice and Developing Nursing Practice Models provide evidence to support annual report

International Family Systems Nursing Collaborative Research Project Report

Dr. Duhamel and Dr. Dupuis

Study Objectives/Research Questions

This report outlines the major outcomes resulting from the first International Family Nursing Collaborative Research (IFNCR) planning meeting held in Montreal (September/October 2012). The primary purpose of the meeting was to create an international knowledge translation (KT) network of both knowledge users and researchers who are specialized in family nursing (FN) and are committed to building and sustaining effective knowledge translation strategies of effective family nursing interventions. FN practice involves the inclusion by nurses of family members in the nursing care of patients experiencing illness, loss and/or disability. The ultimate goal was to translate FN knowledge to clinical settings such that the health of patients and their families is improved and subsequently, family nursing professional practice is advanced.

In 2011, at the 10th International Family Nursing Conference in Japan, family nursing researchers, scholars, and knowledge users agreed that despite a concerted effort and documented effective family nursing practices as well as FN knowledge translation efforts already underway, there is often absent or sparse attention given to families and to implementing FN in clinical settings across the globe. Thus, at this IFNCR meeting, selected family nurse researchers and scholars from Canada, Iceland, Japan, Sweden, Thailand & the US as well as Canadian and American clinicians (knowledge users) in the field of family nursing convened to explore KT strategies that would address this urgent need to translate family nursing knowledge to practice settings. The overarching question guiding the agenda was: How can we collaborate at an international level in translating FN knowledge to practice settings?

More specifically, this meeting provided a forum for (1) international sharing of research expertise/clinical experience between FN researchers and knowledge users, discussion of FN-KT issues and theoretical frameworks, identification of priorities in family nursing knowledge translation; and (2) the conceptualization of a first international FN-KT collaborative research study. In addition, the meeting aimed to identify and begin to mobilize organizational resources as well as additional funding partners for the grant application(s), identify strategies for optimizing the feasibility of the project(s), and clarify roles and expectations for the various participants in preparing the grant application and conducting the research.

Activity

This section describes the structure and process of the two day IFNRC meeting as well as those who participated. Sixteen researchers (8 from Canada and 8 from foreign countries) and twelve knowledge users from Montreal and the USA were present for this meeting. Also present were a Canadian Masters student, a Canadian doctoral student and a US Coordinator (Glen Taylor Nursing Institute). The list of participants is available upon request. Researchers from foreign countries represented the views of their respective local knowledge users specifically those related to challenges in FN knowledge translation and feasibility issues while exploring potential global family nursing research initiatives.
The agenda (copy available upon request) was circulated one month in advance of the meeting. Participants were given pre-reading material related to FN and KT (also available upon request). Dr. Janice Bell, the designated facilitator, opened the meeting by providing a historical overview of family systems nursing practice and research. This synopsis provided participants with an understanding of the state of the science and served as a platform for developing a preliminary international collaborative initiative.

On the first day, as a means of further disseminating FN research and KT initiatives, each researcher provided a 10 minute presentation describing specific areas of research or work, current or most recent FN or KT projects, a description of potential FN-KT sites, and site support (administrative support, feasibility). Each commented on her interest in collaborative FN-KT research (role, resources), possible methodology, variables in designing future KT research in FN and possible funding opportunities. Each voiced a commitment to international collaborative KT research. Dr. Fabie Duhamel provided a review of KT models providing participants with a basis for discussion in choosing specific models for potential FN-KT research projects.

In small groups, participants explored areas for potential research collaboration focusing on the integration of KT models with family nursing intervention research. During the second day, knowledge users and researchers worked together to generate key research objectives, questions, models and outcomes with the aim of developing the most pertinent first collaborative international research project. Participants shared positive verbal feedback about the meeting and commitment to future collaboration.

Key Findings

A significant outcome of the IFNCR meeting was the very process of bringing together at the outset of this FN-KT project, committed family nursing knowledge users and researchers from six countries. Researchers brought varying strengths and expertise in: qualitative and quantitative methodology and analysis, family nursing instrument development, knowledge translation models and processes; and past funded FN research. So that the research team could acquire a better understanding of the systemic context of the clinical settings, knowledge users provided family nursing clinical expertise and knowledge of systemic contextual issues for potential FN-KT research. They voiced the challenges related to FN knowledge translation in clinical settings and contributed to discussions about clinical pertinence and feasibility of the planned research project. There existed a mutual appreciation of strengths brought by both groups with the ultimate aim being to improve the quality of health care for patients and families while also facilitating KT to advance the practice of FN. Building on well-established linkages between the participants and KT-FN initiatives already underway by Duhamel & Dupuis, this planning meeting helped to establish a FN-KT international network of researchers and knowledge users.

After much debate and discussion, participants formulated a question that would form the basis for a collaborative research study that would translate family nursing knowledge to clinical practice: How do we best assist nurses to take up and sustain key practices in family systems nursing that demonstrate changes in family healing and also advance family systems nursing practice?

Knowledge users provided critical information about contextual factors that could influence the success of a KT-FN project (i.e. nurses' perceived time constraints, varying degrees of FN knowledge and skills, early involvement of bedside nurses in FN-KT research, ongoing mentorship and coaching by senior nurses and administrative support). Further examination of contextual factors would be a major focus of this future KT study. Researchers who have conducted family systems nursing research across various international sites concurred that existing FN intervention research is making a positive impact on patient/family/nurse outcomes yet there is a need to conduct KT research to ensure or promote sustainability of family nursing practice. Targeted systems levels for a future KT-FN research project could potentially include four levels of analysis: patient/family health outcomes such as
enhanced healing & functioning; nursing outcomes (i.e. sustained behavioural changes & job satisfaction); larger system outcomes (i.e. a cost-benefit analysis & contextual barriers/facilitators to change); and, professional outcomes (a model for care).

Family systems nursing interventions such as use of engagement skills, genograms, therapeutic conversations, commendations, & therapeutic questions (Wright & Leahey, 2012) have been found to be effective. In 2012, Svavarsson, Tryggvadottir and Sigurdardottir successfully applied two instruments aimed to explore family outcomes related to family systems nursing interventions - the Iceland Expressive Family Functioning Questionnaire (ICE-EFFQ) & the Iceland Family Perceived Support Questionnaire (ICE-PFSQ). They measured the effect of a brief therapeutic conversation between nurses and families experiencing illness in a major Icelandic hospital. Researchers discussed using these existing protocols. Internationally, participants could replicate this study while primarily exploring KT processes such factors that could constrain or facilitate the uptake of identified family nursing interventions. Instruments intended to measure targeted KT variables related to implementing sustainable interventions need further exploration by each international group.

The Knowledge to Action Process framework (Graham et al, 2006) were explored as feasible theoretical frameworks. Researchers concurred that a participatory action research methodology would take into account practice setting context and involve the active participation of the researcher, nurse and family in the research process. It may provide researchers the opportunity for comparison across the six countries as each site would be tailored according to participant views, contextual issues and patient/family involvement.

Given the time constraints, research and knowledge users will meet again in Minnesota on June 19th, 2013 at the 11th International Family Nursing Conference to discuss next steps in this multi-national, multi-site study. Each national group will come prepared to discuss research questions, methodological approaches & strategies for optimizing feasibility of the project, roles and expectations of participants across national & international sites as well as funding and grant applications.

Implications and Actual or Potential Impact

This CIHR planning grant supported a critical, first step in the creation of a family nursing-knowledge translation research agenda. It allowed researchers and knowledge users to mutually share their expertise and research/clinical experiences, thus creating a FN-KT international network.

The implications of this planning meeting are numerous. Primarily, it allowed for the first international exchange of ideas on FSN KT that will promote global synergy and action in research efforts aimed to promote the family nursing practice. There are many obstacles that seem to stand in the way of sustained FN practice despite its research based relevance. Future KT research has the potential to develop knowledge about factors that constrain and facilitate the uptake of identified family nursing interventions. There is, therefore, a pressing need to learn more about how to counteract the constraining factors and promote the facilitative ones in order to hasten FN implementation.

The potential impact is that the international FN research leaders in partnership with the knowledge users, synchronize their areas of expertise to move the practice ahead. The implications of future knowledge translation research agenda in family nursing have the potential to: (1) improve patient care (physical, emotional and spiritual functioning) and improve family health care (family coping, family functioning); (2) improve nursing care in the domains of clinical practice, education & research; (3) provide cost-effective health care and regular collaboration between knowledge users and researchers in future KT projects in FN and, (4) advance the profession
of nursing by continuing to work internationally in an effort to sustain family nursing as a usual and regular practice.

Lay Summary

Family nursing (FN) practice involves the inclusion by nurses of family members in the nursing care of patients experiencing illness, loss and/or disability. A significant outcome of the first International Family Nursing Collaborative Research Meeting (IFNCR) held in Montreal in October 2012 was the creation of an international family nursing-knowledge translation (FN-KT) network. Committed family nursing knowledge users and researchers from six countries (Canada, Iceland, Japan, Sweden, Thailand & the US) met to discuss issues, priorities and pertinent research questions/methodology in family nursing knowledge translation with a goal to collaborate on international FN-KT research projects. Participants came to a consensus to focus a collaborative project on: How do we best assist nurses to take up and sustain key practices in family systems nursing that demonstrate changes in family healing and also advance family systems nursing practice?

Further examination of contextual factors would be a major focus of this future KT study. Researchers concurred that a participatory action research methodology would take into account practice setting context and involve the active participation of the researcher, nurse and family in the research process. It could provide the opportunity for comparison across the six countries as each site would be tailored according to participant views, contextual issues and patient/family involvement.

The group will reconvene on June 19th, 2013 at the 11th International Family Nursing Conference in Minneapolis, Minnesota to discuss next steps in this multi-national, multi-site study. Each respective international group will come prepared to: further discuss specific research questions and methodological approaches & strategies for optimizing feasibility of the project; clarify roles & expectations of participants across national and international sites; and, report on funding & grant applications.
Appendix

Local Research Participates in the International Family Systems Nursing Collaboration

Short Term Therapeutic Family Conversation Investigation: A Hennepin County Medical Center Proposal

Dr. Sandra Eggenberger (Director), Dr. Marcia Stevens (School of Nursing) and Kelly White (HCMC Manager)

Problem and Review of Literature

Attending to the complex physiological needs of critically care patients in busy critical care settings such as the Surgical Intensive Care Unit at Hennepin County Medical Center can be challenging for the most experienced nurses (Van Horn & Kautz, 2007; Davidson, 2009). Family members of these hospitalized patients also experience emotional distress, conflicts, uncertainties, and difficulties coping (Eggenberger & Nelms, 2007; Henriksson, Benzein, Ternestedt, & Andershed, 2011; Davidson, Jones & Bienvenu, 2012). Communicating with family members to minimize distress and provide the information and emotional support they need to manage the experience and support their critically ill family member can be difficult for nurses in this setting (Davidson, Jones & Bienvenu, 2012; VanHorn & Tesh, 2000; Verhaeghe, Defloor, Van Zuuren, Duijinstee & Grypdonick, 2005).

Yet, medical and nurse researchers report nurse-family communication has potential to influence patient and family health in the critical care setting (Curtis, Englebert, Wenrich, M. D., et al, 2005; Hardin, 2012). Communication with families that acknowledge the family distress and complex environment, commend family strengths, and address family concerns have been found to develop trust, increase family satisfaction with care, support family coping, and improve patient and family health outcomes in critical care settings (Alvarez & Kirby, 2006; Davidson, 2009; Davidson, Jones & Bienvenu, 2012; Davidson, et al., 2007; Eggenberger & Nelms, 2007; Svavardottir, 2008; Tapp, 2001; Wright, 2005; Wright & Leahey, 2013; Wright & Bell, 2010). Even brief communication with a nurse can be meaningful and supportive to families during the stress and demands of an illness experience in the hospital setting (Svavarsdottir, Tryggvadottir, & Sigurdardottir, 2012; Martinez, D’Artois & Rennick, 2007).

This meaningful and purposeful communication can occur through the use of a “short-term therapeutic family conversation” (Wright & Bell, 2010; Wright & Leahey, 2009; Svavarsdottir, Tryggvadottir, & Sigurdardottir, 2012). This nursing intervention, based on family systems theory, is a focused conversation between nurses and family members that can be learned and used in the SICU to support families, improve family nursing practice, and enhance nurse fulfillment in their professional role (Soderstron, Benzein & Saveman, 2003; Wright, 2005; Wright & Bell, 2010; Wright & Leahey, 2013).

Purpose of Study

The purpose of this study is to evaluate if an educational program designed to teach and strengthen SICU staff nurses knowledge and skill in the use of a “Short-Term Therapeutic Family Conversation” has an impact on family satisfaction with care and staff nurse perceptions about their family nursing practice.
Research Questions

The research questions guiding this project are as follows:

1. Are there differences in SICU RN staff nurse’s self-reported perceptions of family nursing practice prior to and following participation in an educational program entitled “Short-Term Therapeutic Family Conversation”?
2. Are there differences in Family Satisfaction with Care in the Intensive Care Unit scores following an educational program entitled “Short-Term Therapeutic Family Conversation”?

Methodology

Quasi-Experimental Design

Study design is a pre and post-test non-equivalent comparison groups. The estimated duration of the study is approximately one year.

Study design will also include a participatory process where nurse leaders and staff will provide input on the design and methods of the educational program and study. Qualitative data collection and analysis will be used throughout the design, implementation and evaluation of the educational program and study.

Study Sample(s)

Study sample includes:

1. Convenience sample of Registered Nurses employed in the SICU
2. Convenience sample of families who have a family member admitted during study duration

Pre-test and post-test measures

1. Family Satisfaction with Care in the Intensive Care Unit: FS-ICU (24) (currently in use at HCMC, SICU). 13 items collect quantitative data and 3 items collect qualitative data (Wall, Engelberg, Downey, Heyland & Curtis, 2007)
2. Family Nursing Practice Scale (Simpson & Tarrant, 2006). 13 item self-report measure of nurse’s perceived confidence, satisfaction, knowledge and skill with their family nursing practice. 10 items collect quantitative data and 3 items collect qualitative data

Elements of Educational Intervention

The initial plan for the educational program includes a four hour on-site didactic with a role play practice opportunity. A topical outline for educational intervention follows:

a. Family Illness Experience and Family Nursing Knowledge
b. Family Nursing Practice Challenges and Outcomes
c. Family Conversations and Questioning techniques
d. Family Role Play
Study Procedure-- Estimated Time Line

1. Confirm with Kelly White, RN, MS the individuals designated as RN co-investigators for the study. Arrange for one hour meeting with these nurses at HCMC to review goals of study and proposal draft. Seek input on study design and educational intervention.

2. RN Practice Setting Co-Investigators:
   a. Provide input and thoughts about study proposal and how to make realistic in the context.
   b. Engage co-investigators in planning educational intervention.
   c. First to be educated in the Short-Term Therapeutic Family Conversation.
   d. Complete of “pre-study/intervention” stage of gathering adequate number of completed Family Satisfaction With Care in the ICU forms for comparison purposes.
   e. Engage staff in completion of “pre-test” Family Nursing Practice Scale and participating in on-site educational intervention (determine best day(s) of week/ time(s) of shift/ or benefits/compensation)
   f. Maintain momentum of study with continual check-in and coaching support by Academic Investigators. Provide ideas on how best to maintain momentum.
   g. Explore the use of laminated cards affixed to whiteboards or by computers with the Short-Term Therapeutic Family Conversation Questions listed:
      1. What is the greatest challenge facing your family during this hospitalization?
      2. Who do you believe is suffering the most in your family during this time? What do you think is most needed at this time?
      3. How can I best help you and your family?
      4. If there were one question you could have answered now, what would it be?
      5. Compliment family about an identified strength you have observed in the family member with which you’ve been conversing.
   h. Mechanisms to collect the pre and post data surveys – when and where?
Appendices

Visiting Scholar Appendices provide evidence to support annual report.

Itinerary for Dr. Denham

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<td>2:00 IFNA Board of Directors Conference Call with Sandra – location at 7700</td>
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<td>4:00 – 6:00 – Book meeting at Tricia Young’s house with Norma, Tricia, Sandra, and Sharon – Dinner to follow</td>
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Thursday, August 16th Fairview Ridges Hospital, Burnsville – Site assessment

Quotes and Outcomes from Nurse Leadership Teams at Fairview Ridges Consultation with Dr. Denham:

- “Thanks for coming yesterday! I really appreciate all the insight and feedback you shared. Laura and I feel we can make some of the environment changes in short order which should take the edge off the situation while we do the real work of transforming into a truly patient and family centered care organization.”
- “The latest version of my IRB is attached. I’ll work on incorporating the control group for the nursing education and the second set of family surveys this weekend. This is really getting fun!!
- “Also attached is Laura’s dashboard project that we talked about yesterday. You will find a tab for each unit. Not all the data is there yet, and most units are still working on what they really want on their dashboard, but this is where it is to date. I’ve also attached the SBAR that Laura sent concerning the dashboard process.”
- **White Boards** - “We’re planning on using a framed plexi-glass board with a changeable template behind the glass. The template will be done by a professional printing company. Cleaning up the look of the boards is one issue, but the bigger issue is content. We really want to get this right this time and have the best proposals ready for our patient and family member advisory group to look at when they meet for the first time, so your ideas are greatly appreciated.”

Contact info so you can reach us:
Laura Randgaard, Coordinator of Professional Practice lrandga1@fairview.org 952-892-2779
Katie Eisold, Coordinator of Family Life keisold1@fairview.org 952-892-2255
Carol Koeppel-Olsen, VP of patient Care and CNO ckoeppe1@fairview.org 952-892-2104
Marita Sanders, Nurse Manager ICU/Cardio/Cath Lab msander1@fairview.org 952-892-2298 Cell#612-202-6613
Agenda of Dr. Denham’s consultation with Mayo Health Systems, Mankato

o 0900-1000 Room 0310 Palliative Care Team with Ann

o 1000-1200 Room 0310 Nursing Clinical Practice, Education and Quality Department (NCPEQD)

* Bariatric Implementation - will invite Heidi Bednarchuk, Bariatric Coordinator to meeting and discuss current state and future developments.

* Teach back - Jody Mitchell will queue up this diffusion project that is coming and solicit family focused ideas to implement with this

* International Family Research Project. Dr. Denham and Dr. Eggenberger will further explore this initiative so Mayo system can make further arrangements.

* If there is additional time we thought we could discuss the Bedside Rounding rollout out and updated changes and request some additional advice/suggestions from Dr. Denham’s perspective.

o 1200-1300 Room 0310 Lunch with NCPEQD
Dr. Denham Consultation
Madelia Community and Madelia Hospitals and Clinics

Pictured are some of the attendee’s of the Healthy Lifestyle and Diabetes prevention presentation. Sitting Norma Krumwiede, Hazel Neuensehwander, Leota Brudelie, and Candy Fenske. Back row: Donna Ericson, Jill Smith, Alyssa Tranby, Emily Cameron, Amy Hiltner, Dr. Sharon Denham, Leigh Cherry, Kim Lewis, and Donna Klinkner.

Madelia Community Hospital and Clinic was honored to have Dr. Sharon Denham come and meet with staff about family centered care and diabetes care. The Glen Taylor Nursing Institute for family and society has been collaborating with the Madelia Community Hospital & Clinic (MCHC) to provide family focused nursing care. Dr. Sharon Denham who is world renowned in the Care of Diabetes and Family Focused care came to meet with nursing staff and administration to explore avenues to make family center of care practices stronger at MCHC. The consultative support of Dr. Denham and the MSU team of Dr. Norma Krumwiede, Dr. Sandra Eggeberger and Kelly Krumwiede is a valuable tool in achieving family focused nursing care at MCHC.

In addition to meeting with leadership and nursing staff Dr. Denham did a wonderful community presentation on Healthy Lifestyles and Diabetes prevention. The expertise and compassion that Dr. Denham was very helpful to those in attendance. Each person took something away that they could apply to their daily lives. From reading labels more closely to managing diabetes in your family and what steps you could make to try prevent becoming a diabetic.

Madelia Community Hospital & Clinic will continue to work on this family centered care initiative and look forward to providing family centered care for you and your family.
Appendices

Becky Taylor Fellowship Appendices provide evidence to support annual report.

Becky Taylor Fellow, Dr. Sue Ellen Bell & Dr. Sandra K. Eggenberger Submit DNP Project for Publication

August 31, 2013

Janice M. Bell, RN, PhD
Editor, Journal of Family Nursing
University of Calgary
Calgary, Alberta, Canada
Dear Dr. Bell:

I am including a submission to the Journal of Family Nursing Special Issue addressing the Illness Beliefs Model (Wright & Bell, 2009; Wright, Watson, & Bell, 1996) entitled, “Modeling and Coaching of Family Presence During Resuscitation: Clinical Application of the Illness Beliefs Model.” The manuscript is 24 pages long (excluding the title page and abstract). In addition, there are 2 tables, 1 figure, and 7 pages of references. This copy has been blinded to conceal the identity of the university affiliation and previous publications of the co-authors. The unblended copy is available if selected for publication.

This manuscript represents a Doctor of Nursing Practice evidence-based project that included the clinical application of the Illness Beliefs Model. The project included translation of national clinical practice guidelines for Family Presence During Resuscitation into a clinical practice environment with emphasis on mentoring and coaching family nursing care.

Some of the data from this paper were previously presented at two nursing symposia in poster presentation format including the Celebrating Nursing Practice nursing symposium in Bemidji, Minnesota (April 12 and 13, 2013) and the Advancing Nursing Practice nursing symposium in Fargo, North Dakota (May 2 and 3, 2013). This manuscript has not been submitted to any other journals for publication consideration.

This evidence-based project was supported in part by Becky Taylor Doctoral Fellowship funds awarded to Rhonda Lynn Bender by the Glen Taylor Nursing Institute for Family and Society at Minnesota State University – Mankato, MN. Institutional Review Board approval was obtained from both the university and the medical center ensuring the project’s ethical standards. Permission was also obtained for use of the survey scales and can be provided as needed.

I will be serving as the corresponding author for this manuscript. All of the authors listed in the byline have agreed to the byline order and to submission of the manuscript in this form. I have assumed responsibility for keeping my coauthors informed of our progress through the editorial review process, the content of the reviews, and any revisions made. If the manuscript is accepted for publication, a certification of authorship form will be signed by all coauthors. Thank you in advance for the consideration of this work.

Respectfully submitted,

Rhonda Bender, DNP, RN, CNP
Bagley, MN 56621
(218) 694-2078 (Home Phone)
RhondaBender@hotmail.com
## Appendix

### IFNA pre and post conference evaluations

#### 10. Teaching Family-Focused Nursing Care Using Simulation

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Comments: (please specify)

- answered question 27
- skipped question 96

#### 11. POST-CONFERENCE - Learning to Teach “Thinking Family” Using High-Fidelity Simulations

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<td>61.9% (13)</td>
<td>23.0% (5)</td>
<td>9.5% (2)</td>
<td>4.6% (1)</td>
<td>0.0% (0)</td>
<td>21</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interactive participation contributed to workshop.</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Fair</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Rating Count</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>63.6% (14)</td>
<td>13.6% (3)</td>
<td>22.7% (5)</td>
<td>0.0% (0)</td>
<td>0.0% (0)</td>
<td>22</td>
</tr>
</tbody>
</table>

Comments

- answered question 22

---
<table>
<thead>
<tr>
<th>Q10. Teaching Family-Focused Nursing Care Using Simulation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.</strong> I really liked the workshop and I am very interested in knowing more about simulation.</td>
</tr>
<tr>
<td><strong>2.</strong> I did not participate</td>
</tr>
<tr>
<td><strong>3.</strong> Colleen Royle was excellent! I really enjoyed her presentation.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Q11. POST-CONFERENCE - Learning to Teach &quot;Thinking Family&quot; Using High-Fidelity Simulations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.</strong> well organized and informative day. very glad I attended and will keep in touch with the faculty here.</td>
</tr>
<tr>
<td><strong>2.</strong> I did not attend this.</td>
</tr>
<tr>
<td><strong>3.</strong> I did not participate</td>
</tr>
<tr>
<td><strong>4.</strong> This was an excellent workshop. The whole experience was thoroughly enjoyable. The hosts were enthused about their work, they provided a great learning experience and treated us well. The method of teaching is one I hope can be adopted in more places. The day was wonderful- food and refreshments provided and the winery tour a great way to top it off!</td>
</tr>
<tr>
<td><strong>5.</strong> Inspiring and well planned. Great field trip!</td>
</tr>
<tr>
<td><strong>6.</strong> excellent well presented and engaging</td>
</tr>
</tbody>
</table>

| **7.** overall conference comment removed |
| **8.** This was a major highlight. Very inspiring. | Jun 28, 2013 9:28 AM |
| **9.** Appreciated the staffs enthusiasm in showing off and sharing their work at the Glenn Taylor Institute. True example of a team that capitalized on "what we are great at and do better than anyone else". The visit to the winery was most pleasant and hospitable. Thank you Dr. Eggenberger. | Jun 25, 2013 4:29 AM |
| **10.** entire conference was a poor value for the money. | Jun 22, 2013 1:45 PM |
Highlights From the 11th International Family Nursing Conference, Minneapolis, Minnesota, USA, June 9-22, 2013

In 2009, the International Family Nursing Association (IFNA) was formally launched at the 9th International Family Nursing Conference in Reykjavik, Iceland (Bell, 2011; Van Riper, 2010). A Coordinating Committee comprises Drs. Janice M. Bell, Catherine (Kit) Chesla, Donna Miles Curry, and Kathleen Knaff began work in 2007 to develop the structure and processes for this new organization. The mission of IFNA is to foster the individual and collective development of nurses involved in the promotion of health care to families by providing a unique international forum of shared responsibility for the advance of family nursing. IFNA offers opportunities for leadership, socialization, and collegial exchange related to all aspects of family nursing. (Retrieved from the IFNA website: http://www.internationalfamilynursing.org)

Generous financial support for the new organization was provided for the first 2 years of IFNA by the Glen Taylor Nursing Institute for Family and Society (http://ahn.mnsu.edu/nursing/institute/), and family nurses from around the world were invited to join IFNA. A list of the 62 Founding Members of IFNA can be viewed on the IFNA website: http://internationalfamilynursing.org/2012update/wp-content/uploads/2012/09/110215_Founding.pdf.

The exciting 11th International Family Nursing Conference held in Minneapolis, Minnesota, June 19-23, 2013, marked the first time the conference was officially organized and sponsored by IFNA. The choice of theme for the 11th International Family Nursing Conference, “Honoring the Past, Celebrating the Future,” was a fitting tribute to the stalwart, courageous efforts of a community of family nurses who have gathered together somewhere in the world every 2 or 3 years for the past 25 years without a formal organization beginning with the First International Family Nursing Conference in 1988, initially conceived and created by Dr. Lorraine Wright and her colleagues at the University of Calgary in Alberta, Canada. A history

Leadership for the masterful organization of the 11th International Family Nursing Conference was provided by the IFNA Conference Committee cochaired by Drs. Kathleen Knafl and Catherine (Kit Chesla). Members of the IFNA Conference Committee included Dr. Marcia Van Riper, President of IFNA and IFNA Board Liaison along with Drs. Janet Deatrick, Sandra Eggenberger, Ann Garwick, Catherine Gilliss, and Wendy Looman. The Glen Taylor Nursing Institute for Family and Society was the Official Sponsor of the 11th International Family Nursing Conference. Additional conference sponsorship was actively recruited from Schools of Nursing and other health care institutions in the United States and Dr. Catherine Gilliss deserves special recognition for her leadership in this fund-raising initiative. The Japanese Association for Research in Family Nursing (sponsor of the 10th International Family Nursing Conference in Kyoto, Japan, in 2011) generously donated funds to IFNA for the 11th International Family Nursing Conference and SAGE Publications was also a sponsor for this conference.

The Local Arrangements Committee chaired by Dr. Sandra Eggenberger, Director of the Glen Taylor Nursing Institute for Family and Society, included Lynn Kuechle, Coordinator of the Glen Taylor Nursing Institute for Family and Society, Drs. Ann Garwick and Wendy Looman, and nursing student volunteers from Minnesota State University (Mankato) and University of Minnesota. Together with the able assistance from Debbie Zaparoni and Beth Kasselen (Kasselen Associates is the management company for IFNA), months of intense planning and organizing by all of the family nursing leaders named above created a warm welcome to Minneapolis, Minnesota, for 430 participants from 27 countries (see Table 1).

The Opening Ceremonies of the 11th International Family Nursing Conference began on the evening of June 19, 2013, following the completion of six Preconference Workshops held earlier in the day. For more information, see the Final Conference Program: http://internationalfamilynursing.org/2012update/wp-content/uploads/2012/09/IFNA_11thConfBrochure_051113-FINAL.pdf. Flags, along with the national anthem and photos from each country, helped participants appreciate the global diversity represented at this conference. Participants were invited to stand and dance when their 30 s of national anthem was played and which introduced a spirit of patriotism, playfulness, and inclusion in the Opening Ceremonies. The Minnesota Chorale Children’s Choir performed several poignant musical numbers that highlighted family themes and international connection. The IFNA Local
Table 1. Distribution of the 18th International Family Nursing Conference Participants by Country.

<table>
<thead>
<tr>
<th>Country</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Australia</td>
<td></td>
</tr>
<tr>
<td>Austria</td>
<td>2</td>
</tr>
<tr>
<td>Brazil</td>
<td>29</td>
</tr>
<tr>
<td>Canada</td>
<td>28</td>
</tr>
<tr>
<td>China</td>
<td></td>
</tr>
<tr>
<td>Croatia</td>
<td></td>
</tr>
<tr>
<td>Denmark</td>
<td>7</td>
</tr>
<tr>
<td>Egypt</td>
<td></td>
</tr>
<tr>
<td>Finland</td>
<td>5</td>
</tr>
<tr>
<td>Germany</td>
<td></td>
</tr>
<tr>
<td>Iceland</td>
<td></td>
</tr>
<tr>
<td>India</td>
<td></td>
</tr>
<tr>
<td>Ireland</td>
<td>3</td>
</tr>
<tr>
<td>Italy</td>
<td>2</td>
</tr>
<tr>
<td>Japan</td>
<td>63</td>
</tr>
<tr>
<td>New Zealand</td>
<td>5</td>
</tr>
<tr>
<td>Norway</td>
<td></td>
</tr>
<tr>
<td>Portugal</td>
<td>6</td>
</tr>
<tr>
<td>Republic of China (Taiwan)</td>
<td>0</td>
</tr>
<tr>
<td>Rwanda</td>
<td></td>
</tr>
<tr>
<td>Saudi Arabia</td>
<td></td>
</tr>
<tr>
<td>Spain</td>
<td></td>
</tr>
<tr>
<td>Sweden</td>
<td>9</td>
</tr>
<tr>
<td>Switzerland</td>
<td>9</td>
</tr>
<tr>
<td>Thailand</td>
<td>22</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>7</td>
</tr>
<tr>
<td>United States</td>
<td>205</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>433</strong></td>
</tr>
</tbody>
</table>

Organizing Committee also created a very enjoyable social event on Friday evening consisting of dinner on a riverboat cruise on the Mississippi River.

Conference keynote speakers included Pauline Boss, PhD; Patricia Benner, RN, PhD, FAAN; and Pamela Hinds, PhD, and these keynote addresses were translated into Japanese. The IFNA Conference Committee accepted 216 oral papers and 212 posters and these along with the Japanese translations of the keynotes can be viewed at https://www.hightail.com/
The Closing Ceremonies on June 22, 2013, included an invitation from Dr. Margaret H. Angelo, Chair of the IFNA Local Organizing Committee, to join her and her family nursing colleagues in São Paulo, Brazil, in June 2015 for the 12th International Family Nursing Conference sponsored and organized by IFNA. Drs. Kathleen Knafl and Janet Deatrick will serve as the cochairs of the IFNA Conference Committee for this next conference. A colorful performance by a dance group called Kalpulli Yaocenoxtli concluded this energizing and inspiring 11th International Family Nursing Conference. The dance group’s Facebook page describes the dancers as “... composed of families that are committed to life-long learning of the philosophy, dance, drum and songs of the Mexica (Aztec) traditions” (https://www.facebook.com/pages/Kalpulli-Yaocenoxtli/199883176759380).

A special thank you to each family nursing colleague who dedicated time, travel funds, and scholarly contributions to the 11th International Family Nursing Conference. IFNA membership rose to more than 400 members through your support and commitment. I urge your continued involvement in IFNA and look forward to seeing you in Brazil in 2015.

Janice M. Bell, RN, PhD
Editor, Journal of Family Nursing

References


Appendix

Strategic Plan 2008-2012 provides evidence to support Annual Report Indicating Institute Meeting Goals

<table>
<thead>
<tr>
<th>Planning Area</th>
<th>Year 1 2010-2011</th>
<th>Year 2 2011-2012</th>
<th>Year 3 2012-2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Curricula Revision (include family &amp; societal health)</td>
<td>Support Curricula Plans: BSN, RN to BSN, Graduate program DNP</td>
<td>Continued work curricula and courses across all programs. Develop simulation that focuses on family and societal health. Offer elective in DNP Consortium related to Family and Societal health.</td>
<td>Fully implement curricula and courses across all programs. Expand simulation in areas of family and societal health.</td>
</tr>
<tr>
<td>Faculty Development (build areas of family &amp; societal health expertise)</td>
<td>Continue Family &amp; Society Faculty Scholarship Colloquium. Invite Taylor Advisory Council/Taylor Visiting Scholars to participate. Faculty orientation to Institute. Identify and plan faculty skill development needed related to scholarship (e.g. grant-writing, IRB compliance, funding agencies, writing for publication, scholarship topics around family &amp; society). Faculty workshop/retreat (focus on building work relevant to family &amp; societal health). Mentoring activities. Visiting scholars work: Family &amp; Society Institute</td>
<td>Continue Family &amp; Society Faculty Scholarship Colloquium. Continue Faculty Skill Development in Scholarship. Visiting Scholars Work: Family and Society Institute Continue Mentoring Activities. Emphasize Colloquium and Scholars to Community (MSM and Beyond)</td>
<td>Continue Family &amp; Society: Faculty Scholarship Colloquium. Visiting scholars Work. Expand Colloquium and Scholars to Community (MSM and Beyond). Begin Search for Endowed Chair</td>
</tr>
</tbody>
</table>
| **Build Faculty Scholarship** | Identify supports for faculty scholarship aligned with the Institute.  
Identify a focal area to build streams of faculty scholarship.  
Identify seed monies for pilot work for faculty scholarship (e.g., ANF, STTI, nursing organizations, local foundation, etc.).  
Participate in manuscript development and submissions.  
Participate in national presentations. | Identify another focal area to build faculty scholarship.  
Support faculty scholarship (Research Projects aligned with Institute).  
Support faculty dissemination of scholarship aligned with Institute.  
Intentional hiring.  
Development of internal experts.  
Support at least two new faculty members apply for internally funded research incentive.  
Participate in manuscript development and submissions.  
Participate in national presentations. | Identify another focal area to build faculty scholarship.  
Support faculty scholarship (Research Projects aligned with Institute).  
Support faculty dissemination of scholarship aligned with Institute. |

| **Graduate Student Supports & Fellowships** | Identify areas to build student scholarship linked with family & societal health.  
Refine student scholarship processes.  
Award Becky Taylor Fellowship to DNP students’ projects aligned with family & societal health.  
Invite Taylor Advisory Council members/Taylor Visiting Scholars to graduate student seminars.  
Invite graduate/DNP students to faculty scholarship colloquium.  
Dissemination award to DNP students’ family/societal projects. | Develop programs of research for student thesis & project work.  
Provide family and societal seminars for Becky Taylor Fellowship recipients.  
Continue Becky Taylor Fellowship & Dissemination award.  
Further expand Becky Taylor Fellowship Reception to community. | Develop programs of research for student thesis & project work.  
Offer family and societal elective for DNP curricula.  
Continue Becky Taylor Fellowship & Dissemination award. |
| Presence Potential Students & Faculty | Establish a presence at National and International Events related to family & societal health. | Continue to increase visibility. Expand presence to inform future researchers, educators and practitioners. | |
| International Presence | Support IFNA. Faculty and student participation at 10th International summer conference (Japan). | Support IFNA Planning for 11th International summer conference 2013 | Venue for IFNC? |
Family-Focused Care: ‘Think Family’ and Transform Nursing Practice
Book Prospectus

Editors
Sharon A. Denham, DSN, RN
Sandra Eggenberger, PhD, RN
Patricia Young, PhD, RN
Norma Krumwiede, EdD, RN

Prelude: Introduction to the Book

The purpose of this textbook is to suggest alternative ways for nursing students to learn about the practice of nursing. Nursing has long relied on thinking primarily tied to the medical model and related traditional practices that is primarily focused on the individual. This book proposes alternative ideas for nurses to consider in meeting the health care needs of those living in the 21st century.

Those in the nursing discipline have long looked to Florence Nightingale’s vision of nursing and her views. Nightingale truly believed that the major role of nurses was “to put the patient in the best condition for nature to act upon him.” Today, this belief might be best supported by valuing family’s importance. In this textbook family is viewed as the unit of care. For purposes of this book, the term family implies relationships where two or more persons are related by any means. This definition allows the person or persons seeking care to define their relationship as health and/or illness care is sought. An ecological model is used to describe the complicated encounters that families experience when one of their members’ needs health or illness care. Family-focused care suggests that family members are nearby to the person seeking care even when not physically present or invisible to the nurse providing care. Family-focused care is relationship-based. Family-focused care views the needs of individuals in terms of their related members, households, complex relationships, and health routines. In family-focused care, empowerment of individuals and family members becomes an essential aspect of care throughout the assessment, planning, intervention, and evaluation processes.

The target of this book is to initiate a dialogue with nursing students, nurse educators, and practicing clinicians about the ways nursing practice can move away from one so deeply entrenched in thinking focused on the individual patient. Instead, equal value and consideration is placed upon the unique relationships pertinent to care needs that are grounded in family needs, strengths, challenges, and resources. Rather than merely learning about family processes, purposes, interactions, roles, etc., readers are introduced to ideas that encourage readers to ‘think family’ as they encounter individuals. Principles from the Family Health Model (Denham, 2003) are used to provide some theoretical underpinnings for a common language about ways to articulate ideas about family-focused care. Examples are provided throughout...
the book to assist students and nurses more clearly provide family-focused care. This book attempts to make the practice of family-focused nursing more clear. This book provides discussion about partnerships, collaboration, and empowerment of individuals while including family. Ideas about ways to nurses can make clinical practice family-focused are presented.

Students and nurses have not always formally learned about family-focused care where they understand the best ways to ‘think family’ in clinical practice. Nurses need to know the best ways to assist individuals and their family members manage time, access needed resources, make difficult decisions, choose priorities, provide emotional support, alter risky behaviors, utilize health information, and balance competing family needs. Nurses likely to be most successful in providing care if they learn to ‘think family.’

The book’s five sections and 15 chapters provide information about the importance of family-focused care and its current relevance to individuals, families, communities, and our larger society. Readers will have opportunities to consider

(a) differences between individual and family care,
(b) reasons to re-envision nursing care that is family-focused,
(c) specific areas of knowledge linked with family care,
(d) ways to think about family care and cultivate skills aligned with speaking the voice of family, and
(e) explicit strategies for delivering family-focused nursing care.

Book Features
- Introduces the concept of family-focused care
- Provides guidelines for assessing family needs
- Provides strategies for improving communications with families
- Provides evidence-based research to support family-focused practice
- Provides strategies for delivering family-focused care in diverse settings
- Provides case studies that help differentiate the way care is delivered using the medical model versus the family-focused model
- Provides key concepts in the beginning of each chapter
- Provides chapter objectives at the beginning of each chapter
- Provides a chapter summary at the end of each chapter
- Each book chapter uses examples that focus on areas of wellness, prevention, acute care, chronic care, and end-of-life concerns.
- Instructor support on DavisPlus that
  - assists in developing simulation experiences for students
  - provides insight into how to transform nursing education using this model
  - provides insight into incorporating this model into nursing curricula
  - provides a testbank
  - provides learning exercises
- Student support on DavisPlus that
  - Provides learning exercises
VIDEOS FROM INTERNATIONAL FAMILY NURSING CONFERENCE

Brief with Family Focus
https://docs.google.com/file/d/0B5n1HNA7S2vmMEJ2YJJIR0J4UTA/edit?usp=sharing

Debrief
https://docs.google.com/file/d/0B5n1HNA7S2vmcGpnOHJGWF82bHc/edit?usp=sharing

Phone Call Simulation SEE Model
https://docs.google.com/file/d/0B5n1HNA7S2vmTmpFS1pnY2YwWjg/edit?usp=sharing

Role Instruction
https://docs.google.com/file/d/0B5n1HNA7S2vmQ3InYWRkVFJZSUE/edit?usp=sharing

Simulation SEE Model
https://docs.google.com/file/d/0B5n1HNA7S2vmX3ZYeVJ3aTFwam8/edit?usp=sharing

Typical Simulation without Family Focus
https://docs.google.com/file/d/0B5n1HNA7S2vmN2IYakFrY1hOU1k/edit?usp=sharing

MCBC PROJECTS

PSA Announcement - Radio
https://docs.google.com/file/d/0B5n1HNA7S2vmb0JyTUEzai1UeWc/edit?usp=sharing

PSA – Television (Spanish)
https://docs.google.com/file/d/0B5n1HNA7S2vmeDZFdjFY31pa0U/edit?usp=sharing

PSA – Television (English)
https://docs.google.com/file/d/0B5n1HNA7S2vX2NSbW9GYXZpdIE/edit?usp=sharing