The UW–Madison School of Nursing is committed to eliminating all forms of racism by employing strategies to support diversity, equity, and inclusion in our profession and to act against racism proactively and purposefully. A full statement outlining the School’s ongoing commitment to operationalize anti-racism in everything we do can be found at go.wisc.edu/z9q209
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LEAD THROUGH INFLUENCE
Uncover the invisible influences that shape your health care operations

LEAD THROUGH CONNECTION
Badger nurses find ways to lead and empower the next generation through mentorship

MORE THAN MEDICINE
New research studies link between hypertension & well-being in Madison’s Black community

CELEBRATING 50 YEARS OF ALUMNIHOOD
The Class of 1972 shares their memories and advice for the Class of 2022
School of Nursing alumni should feel informed, engaged, and represented. The School’s Board of Visitors Alumni Engagement Committee created a survey to gather feedback from all nursing alumni. Please consider sharing your thoughts, experiences, and ideas.

Contact Jordan Langer | jlanger3@wisc.edu

Questions?
go.wisc.edu/pj8aag
Recognizing that health care is a means of making a positive impact on the lives of others, talented individuals with strong leadership attributes are drawn to begin or advance in nursing education at the UW–Madison School of Nursing (SoN). Once here, students discover there are even more avenues than they knew for improving, promoting, and protecting health and well-being as nurses.

Didactic curricula, clinical learning experiences, simulation, co-curricular programming, and immersion opportunities teach what it means to provide excellent patient-centered care. These same experiences also create a recognition of the social determinants and environmental factors that negatively impact health, undermine prevention, and create barriers to care. For many students, this unlocks a deeper appreciation for the complexity of health needs that exist. Importantly, it also broadens their vision of where, how, and on what scale nurses can intervene. Whether they become clinicians, scientists, educators, administrators, or entrepreneurs; or whether they step into the myriad of other roles where their skill set and insight is needed, Badger nurses lead.

It is our mission to develop leaders for the profession and society. This is in support of our vision to be a world leader in nursing innovation that advances health for all. As our students prepare to contribute to a nursing workforce with an aim to build health equity, they must be aware of and willing to disrupt sources of disparities. To do so, they must be encouraged to recognize, embrace, and trust their capacity to lead and create change. Cultivating a leadership mindset and identity is integral to nursing education. I can proudly say that it is a point of distinction at the SoN.

Our faculty and staff consistently model leadership and advocacy. Further, they involve and empower students to develop their voice, refine their judgement, and act decisively as leaders. We are grateful that our clinical partners, alumni, board members, and others in professional and community settings purposefully do the same as preceptors, mentors, role models, and sounding boards for our students and new graduates.

This issue of *ForwardNursing* highlights leadership as an aspect of nursing that is critical to maximizing the impact on health, society, and systems that provide care. The cover artwork asks the question, “How do nurses lead?” Not surprisingly, the pages that follow are filled with examples that demonstrate what we know is true: Nurses lead in all ways, circumstances, and places. Nurse leaders in the profession build and guide teams. They are also present and engaged in communities, working in partnership to better understand the needs—while drawing on the strengths—of underserved populations. Nurses challenge the status quo and then advance knowledge, initiatives, and policies to change it.

The SoN encourages and supports our students in developing their unique style of leadership. We aim to cultivate individuals’ strengths and traits, preparing them to step into action with confidence, humility, passion, and authenticity when and where concerns arise. I am proud that a breadth of approaches are valued and demonstrated throughout the School and in our graduates. The future of nursing will require leadership that takes many shapes, surfaces in a variety of ways, and which can meet a diversity of needs.

Our alumni, friends, and partners—YOU—also have valuable perspectives on leadership to offer. I hope that as you read what is shared by others in this issue of *ForwardNursing,* you will be moved to offer your own thoughts on leadership. It is truly an honor to gather and share stories that reflect the legacy of leadership in our past, demonstrate our present aspirations, and inspire us for a future that transforms health through nursing.

Sincerely,

Linda D. Scott
A transfer agreement between Madison College and the University of Wisconsin–Madison School of Nursing will help address nursing workforce needs by creating greater access to nursing education. In addition, it will support the need for more bachelor of science in nursing (BSN) prepared nurses in health care and improve public health in the state of Wisconsin.

The new agreement between the two nursing programs will help facilitate the transfer of Madison College students who have earned their associate degree in nursing into the UW–Madison School of Nursing’s BSN completion track, known as the BSN@Home program. The degree-completion pathway provides a flexible part-time, online option for working registered nurses (RNs) looking to expand their career opportunities in health care.

“This is the culmination of our efforts to create a seamless pathway from the associate degree in nursing to the baccalaureate degree,” said Dean Linda D. Scott, PhD, RN, NEA-BC, FNAP, FAAN. “I am proud to contribute to the nursing workforce, together, in this way.”

For more, visit go.wisc.edu/fd7s7q

Bowers to Receive Prestigious Award

Professor Emerita Barb Bowers, PhD, RN, FAAN, received The Gerontological Society of America’s 2022 Doris Schwartz Gerontological Nursing Research Award. Presented by the Health Sciences section, the award is given to a member of the GSA in recognition of outstanding and sustained contribution to geriatric nursing research. The award presentations took place at the GSA annual meeting on November 3, where Bowers presented a special lecture. The GSA is the nation's oldest and largest interdisciplinary organization devoted to research, education, and practice in the field of aging. For more, visit go.wisc.edu/w41d19
Grants

Anne Ersig, PhD, RN, was awarded a School of Nursing Research and Scholarship Committee grant to support the project “Stress and Allostatic Load in Adolescents with Chronic Health Conditions.” The primary aim is to determine whether there are differences in cumulative stress exposure, perceived stress, mental health, allostatic load, and biological aging between adolescents with and without chronic health conditions.

Barbara King, MS’87, PhD’10, RN, APRN-BC, FAAN, and Diane Farsetta, PhD, were awarded a grant to support the project titled “UW School of Nursing and UW Health – 4M Initiative.” The project is funded by Bader Philanthropies in partnership with UW-Madison School of Nursing and UW Health. The primary goals are to expand UW Health’s Age-Friendly Health Systems pilot, which uses the 4Ms model (What Matters, Medications, Mentation, and Mobility), an evidence-based intervention, and to prepare nursing students to deliver age-friendly care. The project team includes King, Farsetta, and a to-be-named clinical instructor nursing education lead. Dr. Kari Hirvela of UW Health will lead patient data collection and dissemination efforts.

Grants

Anne Ersig

Barbara King

Kris Kwekkeboom ’89, MS’95, PhD’99, RN, FAAN, was awarded a School of Nursing Research and Scholarship Committee grant to support the project “Website Development for Coordinated Management of Co-Occurring Cancer Related Symptoms.” The primary aim is to develop a web-based learning management system for co-occurring symptom management.

Kris Kwekkeboom

Katie Pavek ’08, PhD’21, RN, was awarded a School of Nursing Research and Scholarship Committee grant to support the project “MINDSTRONG™: Improving Wellness for UW–Madison School of Nursing Students.” The primary aim is to pilot an evidence-based cognitive skills-building program to support students in building mental resiliency and improving overall health and well-being by helping them learn strategies to regulate their emotions, positively cope with stress, and problem solve in a healthy and conductive manner.

Katie Pavek

Rebecca Muehrer ’01, MS’03, PhD’08, RN, was awarded a School of Nursing Research and Scholarship Committee grant to support the project “Improving Assessment of Darker Skin Tones.” The primary aim of the project is to incorporate diverse educational materials into the traditional and accelerated bachelor of science in nursing programs to improve student knowledge and understanding of darker skin tones in health assessments.

Rebecca Muehrer

Tonya Roberts ’03, MS’08, PhD’12, RN, received a Vilas Life Cycle Professorship grant to support the study “Optimizing Person-Centered Care for Nursing Home Residents.” The study is funded by the Women in Science and Engineering Leadership Institute (WISELI) through generous support from the Trustees of the William F. Vilas Trust.

Tonya Roberts

In Case You Missed It

The University of Wisconsin–Madison has a new chancellor! Chancellor Jennifer Mnookin (left) handed out Babcock ice cream and other frozen treats, and talked with deans, including Dean Scott, faculty, staff, and student members of the campus community during an ice cream social held outdoors on Bascom Hill on Aug. 4, 2022. It was Mnookin’s first official day as chancellor of UW–Madison.

(Photo by Jeff Miller / UW–Madison)
School of Nursing Partners with American Journal of Public Health on Special Issue

The School of Nursing proudly partnered with the American Journal of Public Health (AJPH) to create a special supplement on nursing and public health titled “Public Health Nursing After COVID-19: Strengthening, Rebuilding, and Reimagining the System.” The supplement covers nursing and public health, offering insight into the importance of nurses during the COVID-19 pandemic as well as the future of nursing.

Papers engage with nursing and its intersection with climate change, vaccine readiness, community resilience, and home visiting. The issue includes papers by School of Nursing clinical faculty member and PhD student Jessica LeClair ’05, MPH, RN, and Theresa Watts, PhD ’19.

“I want to thank Dr. Susan Zahner for her leadership and for representing the UW–Madison School of Nursing on this initiative. I am proud that we are a part of this effort, in partnership with AJPH, to make nursing and public health research, education, and practice more visible,” said Dean Linda D. Scott, PhD, RN, NEA-BC, FNAP, FAAN. For more, visit go.wisc.edu/k763z6

Cover concept and selection by Aleisha Kropf. Mural by artists Jessica Sabogal and Shanna Strauss, commissioned by Catherine Gilliss, RN, PhD, FAAN, Dean of the University of California, San Francisco School of Nursing.

Awards

Julianna Manske, MSN, RN, OCN, received the Association of Public Health Nurses Emerging Public Health Nurse Leader Award.

Presentations

Linsey Steege, PhD, was invited to participate on a panel at the Human Factors and Ergonomics Society International Symposium on Human Factors and Ergonomics in Health Care in New Orleans. The panel focused on “Human Factors in Nursing and Future Directions,” and her talk was titled “Addressing Nurse Fatigue: Opportunities for Human Factors and Ergonomics.”

New Hires

Kim Neuschel ’01, RN, Community Engagement Facilitator, Wisconsin Network for Research Support (WINRS)

Rebecca Jamieson, Website Coordinator

Liz Fitzpatrick, Marketing and Communications Manager

Cheyanne Carter, Student Communications Specialist

Micah Roberts, Faculty Affairs Supervisor

Polly Jewel, MSN, RN, CCTC, Clinical Instructor

Beth Sevenz, Event Coordinator, Dean’s Office

Kaitlyn Hawley, Academic Program Specialist, UW Center for Interprofessional Practice & Education (CIPE)

Dana Decker, Adult and Student Services Coordinator, Center for Aging Research and Education (CARE)

Katelyn Desorcey-Scherer ’13, PhD, RN, Postdoctoral Trainee

Sung-Min Kang, Administrative Assistant, New to Public Health (N2PH) program

Leigh Casares Arora, Academic Advisor

Teresa L. Lincicum, MSN, Clinical Instructor

Jingxi Sheng, PhD, RN, Postdoctoral Trainee

New Role

Katie Pavek ’08, PhD’21, RN, will serve as Wellness Officer as part of her clinical faculty role

Retirements

Lori Anderson ’79, MS’01, PhD’06, RN, CPNP-PC, NCSN, retired from her position as developer and director for eSchoolCare with the School of Nursing in May 2022.

Brenda Kupsch, CTEN lab manager, retired in July 2022.

Mary Siedschlag, faculty affairs support supervisor, retired in July 2022.

Beth Dawson, career development manager, retired in August 2022.
Promotions & Transitions

Katherine Collins, MS, DNP, AGPCNP-BC, FNP-BC transitioned from clinical assistant professor to the School of Nursing’s global health coordinator. In her new role, Collins leads and coordinates School of Nursing global health initiatives, including summer term immersion experiences in international and global health settings.

Kelli Richards transitioned from student affairs manager to career development and learning support manager this past spring. In her new role, she oversees the School’s Career and Student Services.

Melissa Anibas, EdS, MSN, RN-BC, transitioned from clinical associate professor to CTEN clinical faculty in skills and simulation. In her new role, she is working with accelerated bachelor’s in nursing students to direct instruction of skilled lab sessions.

Megan Miller, PhD, RN, transitioned to an assistant professor position after completing two years in a postdoctoral research fellowship at the School of Nursing. Miller’s work focuses on supporting holistic and compassionate palliative care.

Barbara King, MS’87, PhD’10, RN, APRN-BC, FAAN, and Linsey Steege, PhD, were promoted from associate professor to professor.

Jane Harney, PhD, RN, PNP, NNP-BC, transitioned from a postdoctoral fellowship to an assistant professor position. Harney’s research examines the relationships between environmental stress, genomics, and epigenomics.

Jeneile Luebke ’02, MS’09, PhD, RN, transitioned to an assistant professor position. She was an Anna Julia Cooper fellow in the School of Nursing in 2020-2022 and a STREAM postdoctoral fellow in 2020-2021. She also holds an affiliate appointment with the American Indian Studies program and is a faculty member of the campus Sexual Violence Research Initiative.

Traci Snedden PhD, RN, CPNP, CNE, FNAP, transitioned to a clinical faculty role, bringing her extensive background in teaching, curriculum development, mentoring, leadership, research, and clinical practice to the position. She is well-known for her research contributions specific to concussion in the child and adolescent.

Wendy Halm, DNP, FNP-BC, APNP; Becky Muehrer ’01, MS ’03, PhD’08, RN; and Tracy Saladar, DNP, RN, were promoted from clinical associate professor to clinical professor.

Leah Kechele, DNP, was promoted from clinical assistant professor to clinical associate professor.

Tonya Roberts ’03, MS’08, PhD’12, RN, was appointed as the Karen Frick Pridham Professor in Family-Centered Care.

In the Rankings

In 2022, Nursing Schools Almanac ranked the University of Wisconsin–Madison School of Nursing in the nation’s top 50 nursing schools.*

#42 Nursing School in the United States

#25 Among Public Nursing Schools

#1 Overall in the Great Lakes Region

#7 Overall in Wisconsin

*Based on a detailed assessment of nearly 3,000 nursing schools. For more, visit: nursingschoolsalmanac.com/rankings
“Nursing leaders have comprehensive assessment skills and are able to look at the situation at hand from several different angles. Only after doing so and taking in what others see, does the true leader speak up.”

— PENNY MATHISON ’75, MS’01
When my daughter was a toddler, the lower half of our refrigerator was covered with alphabet magnets. My wife wrote a few words on a sheet of paper and my daughter happily played with the letters and tried to spell the words. Magnets continued to hold an appeal for her as she grew up. She wore out several magnetic doodle boards and adored a set of superstrong magnet toys that clacked and whizzed as their invisible forces attracted and repelled one another. That’s the thing about magnets: they don’t just attract one another and metal; they repel, too.

Magnets aren’t the only things that wield invisible forces. Like magnets, our relationships with one another have the power to attract and repel. That complex network of relationships makes up our organizations’ culture. Health care operations leaders must take care to build up their organization’s culture to harness the invisible, magnetic influences and manage that force to create a high-performing culture.

In his book, Invisible Influence: The Hidden Forces that Shape Behavior, Jonah Berger explains that while we recognize others’ opinions influence people’s beliefs, we rarely acknowledge that we are influenced, too. This blindness to our own susceptibility to social dynamics creates the opportunity for people in our environment to influence us. Their influence can have a positive or negative effect on the health care operations culture.

Group acceptance is a survival strategy. Isolation is dangerous and uncomfortable. We’ve developed strategies to secure our social group membership by doing something as simple as mirroring other group members’ behaviors to paying annual service club membership dues. The group reinforces social norms and encourages members’ conformity. For those concerned with health care operations, patient experience, and quality, the question is, “what behaviors are reinforced?”

Berger cited an experiment where researchers gave subjects a visual test where they were asked a question about an image and the correct answer was obvious. The first three people in the room to be asked about the image were the researchers’ accomplices who were posing as test subjects. As part of the experiment, when asked about the visual, they all gave the same incorrect answer. The fourth person in the experiment, the true test subject, was the last to be asked the question. Even when the answer the first three gave was obviously wrong, the test subject felt pressure from their invisible social cues to not be different, and they often agreed with the incorrect answer of the first three accomplices instead of saying the correct answer.

The same social cues can affect health care organization culture, too. If health care operations leaders encourage a culture that supports diverse ideas and dissenting opinions, group members are more likely to share their ideas without hesitation. Leaders must be aware of cultural influences that shape organizations, too, since these affect an organization’s direction. Does one person decide the group’s direction while other meeting participants nod and sit quietly or do multiple people offer their own ideas before the group reaches a decision? Leaders should create a climate where everyone’s voice is respected and heard.

It’s this invisible social dynamic that makes actively disengaged employees tricky for health care leaders to manage. Actively disengaged employees are not only poor performers, but they also work against the organization’s objectives. If not addressed, actively disengaged employees create a cultural influence on those around them. Their influence negatively changes others’ perceptions about acceptable behavior. By contrast, actively engaged employees do the opposite. They lead the organization’s members to improve their performance. Their positive influence makes them ideal champions for changes that improve cost containment, patient experience, and quality.

Humans are social, and we take behavioral cues from each other. Health care operations leaders must appreciate the invisible role that social influences play in their organization’s success, and cultivate those actively engaged workers who support the organization’s objectives. Developing a culture that reinforces positive behaviors supports leaders’ organizational changes and assists with operational initiatives.

Does your team’s culture reinforce the behaviors you need to succeed?
lead with intention

Three priorities every new nurse manager should establish when starting a new role as a leader in health care operations

by Robert Trim ’01, MBA, RN

First Priority: Watch, Listen, and Learn

As a health care operations director, my first priority when stepping into a new health care operations setting is to observe the status quo before implementing anything. People in established clinics or departments have a way of doing things that has worked. They're not interested in some shiny, new director of operations walking through the door and implementing the flavor of the week approach to their perfectly serviceable processes. Do no harm, right? Instead, an operations director's first priority should be to watch, listen, and learn.

You can't direct what you can't see. No new operations director can expect success by sitting in their office and answering emails. The kind of knowledge the director needs comes from the field. A wise director visits the clinics and departments and plans to spend many days there, watching, listening, and learning about the operation, the people, and the processes.

It's important to take notes, meet people, and listen way more than you talk. This is the time to gather information, observe, start relationships, and to discover the methods in place, view the department or clinic's metrics, and above all: reserve judgement.

Sure, the health care operations director must implement changes, but not for change's sake and not right away. Take the time to understand people as individuals first, and caregivers and providers second. Also, learn their roles, observe what's going well, and note what barriers stand in the way of their mission of delivering great patient care. This isn't just a great beginning, it's also the ongoing behavior of a successful health care operations director. Make this your first priority and you'll have strong working relationships built on trust and the foundation for change management.

Second Priority: Build Strong Working Relationships

Look closely at the famous NASA photo of Buzz Aldrin on the moon and you'll see the image of Neil Armstrong in Aldrin's space helmet. After all, to take this portrait, someone had to be in front of the camera and someone had to stand behind it. Even though these two crew members were by themselves on the moon's surface, they weren't alone. Michael Collins piloted the command module that orbited the moon. Even more scientists, mathematicians, and engineers worked on the mission from Earth. NASA estimates over 400,000 people helped Armstrong take his giant leap for mankind. Armstrong, Aldrin, and Collins had faith in that team to land them on the Sea of Tranquility and to get them home again safely. Strong, empowered teams are at the heart of any successful organization and health care is no different. To deliver on the mission to improve patients' health and wellness, health care operations directors need to trust in their teams and empower those people to make decisions.

Building trust is a gradual process. It's based on listening and communication. It is created by acknowledging stakeholders' pain points, responding promptly to concerns, and collaborating on real, lasting, meaningful solutions.

Trust has to be earned. It's about knowing that the next person in line won't let you or the mission down. As a director of operations, I know that we've hired the right caregivers and providers, and I have confidence in them and their belief in our mission to improve patients' health and wellness. Because I oversee several sites and departments as a health care operations director, I can't be everywhere and must delegate tasks and trust our people. My teams know that I have faith in them to solve the problems they can and escalate those they can't. I believe in them and I'm happy to support them and the decisions they make.
Armstrong, Aldrin, and Collins didn’t complete the Apollo 11 mission on their own. No health care organization fulfills its mission alone, either. My second priority as a health care director of operations is to make sure that I have strong relationships with my people and that they feel empowered to take action on behalf of our patients.

Third Priority: 
Discover and Use Team Members’ Strengths

Years ago I learned to sail on Madison’s Lake Mendota when I was a student at UW–Madison. Sailboats always fascinated me because I appreciated the boat’s ability to harness the power of the wind to send a sailor racing across the water. The wind will blow, so why not channel that energy to speed forward? My third priority for new health care operations directors uses this same principle: harness the power of individual team members’ natural strengths, channel those efforts in the same direction, and watch how the health care operation’s results speed forward.

Over a decade ago, I attended a Great Manager program at Gallup University, where I learned about Gallup’s strengths research (now Clifton Strengths). Researchers interviewed many leaders and discovered that there was no one correct way to lead, manage, or find success. In fact, they found 34 strengths or talent themes. People didn’t have just one strength; they have a combination of the 34 to varying degrees. The top five strengths are a person’s signature themes, but the next five are important, too. The trick is to recognize that everyone has strengths and to guide them toward activities they like, are inclined to do, and would probably do willingly if someone just extended the invitation.

My last few operations management positions haven’t been at strengths-based organizations; however, I still looked at my team members to discover where they excel. One of my caregivers was terrific at organizing things and I’d often see her straightening pens and pencils just so, fixing brochures into neat stacks, and moving break room items to improve the room’s functionality and use. I asked her how she’d re-organize the department’s space and she was delighted to contribute. I’m sure one of her strengths is “arranger.”

Another person was the most tactful supervisor with whom I’ve had the pleasure to work. The rapport she had with colleagues, direct reports, and providers was the envy of everyone, including me. Prickly physicians adored her. Unhappy patients talked to her and were pleased with her and the organization. She’s the person I relied upon to manage roll-outs of new policies and ideas. I’m certain that one of her signature themes is “woo.”

The list goes on. When I’m observing departments, talking to individuals, interacting with teams, and listening to caregiver and provider concerns, I’m always on the hunt for each person’s strengths. Some are analytical and love to pour over data; while others have empathy and connect with patients so well. Everyone has something unique and valuable to contribute to the team effort.

When a health care director of operations focuses on people’s strengths, it de-emphasizes the weaknesses. I think it’s better to put my energy, and the energy of those I lead, into what people do well. Harness that energy — energy that would be there no matter what a leader does or doesn’t do — and channel it into the health care organization’s sails. All of our unique abilities, focused on the mission to improve patients’ health and wellness, can be the natural power behind an operation’s success.

A three-part series originally published in December of 2017. Reprinted with permission from the author.
“It means being a leader without a title and your peers know they can count on you to get things done. It means building up others, encouraging them and showing them the way to go. Be someone others want to follow. Title not required. You can lead wherever you are.”

— BRENDA COUPAR ’09, DNP’18
A MATCH MADE IN MADISON

Amy Bartosiak ’22 had been a licensed massage therapist for 25 years, but COVID-19 caused the massage therapy world to come to a grinding halt for three months, and then it took even longer before people felt safe to start making appointments again.

“Since I did not finish a degree in my twenties, I decided that this was the time to finish a degree that I could combine with massage therapy,” she says.

Bartosiak found herself going back to school at 51 years of age, pursuing nursing as a second degree and adjunct career to massage therapy. But she soon found that the age difference made it hard to relate to her classmates.

“I was coming back to college at age 51 and needed advice and guidance from someone with a similar background,” she says. “I sought out help from others about the school and time management, who were in their twenties, but did not feel like I was understood.”

Bartosiak began looking for guidance, and found the Badger Nurse Mentorship Program, an initiative started by the School of Nursing in 2020. The program helps current students who wish to receive support from School of Nursing alumni as they transition from student nurses to professional nurses.

Students interested in participating in the program are matched with mentors based on personal and professional interests, similar educational backgrounds, as well as future career and educational goals. The program allows for open dialogue about anything and everything, including the NCLEX, discussions about career exploration, networking, emotional support, career goals and interests, and professional skill development.

Bartosiak was matched with Janet Murphy, a 1995 graduate of the School of Nursing’s traditional bachelor of science in nursing program whose journey into nursing and experience ended up being the missing piece to Bartosiak’s puzzle. Murphy, who was 41 when she earned her degree, signed up for the program with an interest in mentoring non-traditional students.

For Bartosiak, the opportunity to join the program and be matched with someone who went through similar experiences was an important part of her journey through nursing school. “Janet helped me with the anxiety I was feeling and helped me understand that older students learn differently than younger,” she says. “It helped me feel like I was not alone in this new journey.”
A LONG DISTANCE LINK

Over the past year, Richard Henker ’81, PhD, CRNA, FAAN, FAANA, and Crystal Griffin ’22, have been connecting to talk about anything from resume and cover letter guidance, mock interview advice, to NCLEX preparation and how to navigate speaking up to advocate for a patient’s best interests in clinical settings as a new nurse.

“Rick not only allowed a safe space for me to talk about the challenges I experienced in my clinical rotations, but he has also taught me the proper way to communicate with others when I feel like something is wrong, and I will always be thankful for this experience,” Griffin explained.

They have built a relationship that will last for years to come, but they have never actually met in person.

"Crystal and I met on a monthly or every other month basis by Zoom,” says Henker. "We would also communicate by email, but I liked the idea of having Zoom meetings since I was in Pittsburgh and sometimes in Cambodia when we met."

Despite the distance, the pair have formed a strong connection that has helped Griffin navigate the final leg of her journey as a nursing student into her full-time position upon graduation as a labor and delivery nurse at UnityPoint Health - Meriter Hospital in Madison.

Griffin was drawn to the mentorship program because of the opportunity to learn. “As a Black woman going into health care, I did not have a lot of knowledge about how to navigate nursing school, NCLEX preparations, and DNP vs. PhD programs,” she explains. “When the Badger Nurse Mentorship Program provided me with a mentor, it gave me the chance to connect with an individual who could help me navigate nursing. The one-on-one opportunity to ask questions has helped me a lot.”

Henker is no stranger to taking on a mentor/mentee relationship; the opportunity to mentor students is one that he has embraced throughout his career. “I have been mentoring new graduate nurses since 1984. I was a clinical nurse educator on the night shift at the University of Arizona Hospital. My job was to work with the new nurses that often started on the night shift,” he said. Adding, “Currently in my faculty position at the University of Pittsburgh, I work with three PhD students (one is at Keio University in Tokyo), 20 DNP Nurse Anesthesia students (scholarly projects), and I had one BSN Honor College student finish in April.”

He adds that he himself had a mentor that greatly impacted his career. “John Clochesy, MS’81, PhD, RN, made a significant impact on my career path,” he said. “He was an instructor for two of my courses at the UW–Madison School of Nursing, went on to be my boss at the University of Arizona Hospital, and we worked together at the University of Pittsburgh where he was the assistant dean. We still keep in touch.”

For fellow Badger nurse alumni who are considering becoming a mentor through the program, Henker has some advice: listen. "Everybody has something to offer students,” he adds. “Sharing your life experiences and just listening to students can contribute to the student’s professional growth.”

THE POWER OF CONNECTION

Impacting the next generation of Badger nurses extends far beyond the mentorship program. Those who are looking to get involved will find a wide array of opportunities through various groups, communities, and volunteer openings including the Badger Nurse Network, Young Alumni group, the Alumni of Color group, as well as mock interview events, Nurses Alumni Organization (NAO) functions, and more.
BECOME A MENTOR!

Thinking about becoming a mentor? The School of Nursing has expanded its Badger Nurse Mentorship Program, and is looking for alumni volunteers to serve as mentors to current BSN@Home, Accelerated BSN, second-year Traditional BSN, DNP, and PhD students.

Who can serve as a mentor?
Any UW–Madison School of Nursing alum can serve as a mentor regardless of program completed.

How many students am I expected to mentor?
Alumni mentors are matched with one student per academic year.

How often do I have to meet with my mentee?
Mentoring pairs decide how often they will meet or talk and what types of conversations and activities they will engage in together. The School of Nursing team recommends connecting at least once per month but ultimately it is up to the pair to discuss and decide.

Do I get to choose my mentee?
The School of Nursing mentorship team selects each pair, but you may indicate a student to be matched with if you have someone specific in mind. There is not a guaranteed match, but the mentorship team takes your request into consideration.

Do I have to live in Madison to be a mentor?
No, location is not a barrier to your participation. Over half our mentors live outside the state of Wisconsin.

I’m interested! What is the next step?
The program formally runs each academic year from September to April. Pairings for the current 2022-23 academic year are officially complete, but the opportunity to mentor a student for the 2023-24 academic year is open!

For more information about the Badger Nurse Mentorship Program, or questions about additional opportunities to get involved, please email the School of Nursing’s alumni relations officer, Jordan Langer, at alumni@son.wisc.edu
LEAD BY EXAMPLE

As a Badger nurse, how do you lead?

When thinking about leadership, thoughts often lean towards picturing individuals in formal positions of management who have authority over a team or group of followers.

However, leadership is not just linked to positions of management and power. It is important to note that those in informal positions of leadership, those who lead by example and influence, can have just as much impact in advancing health care and affecting positive growth and change as those who are in more formal positions.

For almost a hundred years, Badger nurses have been leading the way by inspiring and guiding others in both the profession and society.

They have been trailblazers through research, advanced health care through innovation, and impacted the global community through volunteerism and service efforts in organizations like the Red Cross and the Peace Corps. They have advocated for patients at the bedside, fought for policy change, stood at the front lines of a crisis, and helped open doors to improve access to health care. Badger nurses have revolutionized nursing through advancing technology, asking the tough questions, and being champions of change. They have risen through the ranks of health care, led by example in non-traditional leadership roles, and enacted change as influencers and change agents.

TELL US YOUR STORY!

As the School prepares for its centennial celebration in 2024, we want to highlight the many ways Badger nurses lead. Whether you lead in a formal or informal position, trailblaze new paths, lead by example, advocate for change through policy reform, innovate, volunteer, influence, coach, mentor, or more, we want to tell your story! Alumni interested in sharing their stories can visit go.wisc.edu/617e87 to fill out a questionnaire or may email alumni@son.wisc.edu for inquiries, to submit photos, or for further assistance. We look forward to hearing from you!
“Nursing leaders know what questions to ask, listen first, learn from others, respect, motivate, mentor, and empower. They lead by example and work well as collaborators in interdisciplinary teams which include the patients and families for whom they advocate and empower. They seek partnerships, and they understand systems. They seek to improve quality, safety, and policy. They innovate, are agents of change, and communicate effectively with confidence. They bring evidence-based practice; critical thinking wherever they are. As Badger nurses, we are all leaders in many varied settings and communities.”

— PEGGY ZIMDARS ’73, RN, PNP
Finding Leadership on Our Paths to Nursing

BY DANIELLE HARRIS x’23 AND MJ JOSEPH x’23
PHOTOGRAPHY BY KRISTEN KOENIG

Meet Danielle

Ever since high school, I have loved to get involved in school activities and organizations to collaborate with other students and the communities that shared similar interests and passions as mine. During my freshman year at the University of Wisconsin-Madison, I knew I wanted to find a community of nursing students that I could open up to and share my passion, goals, and fears with, so I joined the Multicultural Student Nursing Organization (MSNO). In this organization, I was able to learn from upper-level nursing students about their pre-nursing experiences and get advice for my own application. They encouraged me to not fixate on making myself “appear more competitive,” and instead find ways to get involved, network, and grow. This meant remaining true to my passion for the nursing profession, which is working to bring equitable care to the health care field, and helping to dismantle the discriminatory practices in health care that affect underserved populations and identities.

Once I was accepted into the School of Nursing, I began to see even greater meaning in my leadership role in MSNO: I was now the mentor for so many members of the organization and other pre-nursing students on and off campus. I then took the initiative to become a student ambassador so that I

The School of Nursing’s mission is to develop leaders for the nursing profession and society. One of the ways the School cultivates leaders is by providing opportunities for students to develop and enhance their leadership skills through various student organizations, jobs, and research opportunities. We, Danielle and MJ, are both second-year students in the traditional bachelor of science in nursing program and expect to graduate in May. We are current student ambassadors and are involved in several other student leadership roles. We’re excited to share our personal experiences as student leaders with you!
Meet MJ

As a senior in high school, I knew that I wanted to pursue a career in health care and that I wanted to attend a university far away from home. I ended up only doing one of those things! The University of Wisconsin–Madison is only about an hour and half from my hometown of Kenosha, Wisconsin — much closer than I had anticipated. I’ve learned that I didn’t actually want to be far from home, I just wanted the ability to discover myself and grow as an individual. Coming from a small school to a big university would most likely have been more intimidating if not for all the amazing resources that UW–Madison has to offer; anything from tutoring services to intramural sports is within a short bus ride. I have to say, though, what really attracted me to UW–Madison was the School of Nursing.

While the School of Nursing does not have a direct admit program and is competitive, I could not help but feel at home when I entered the doors of Signe Skott Cooper Hall for the first time my senior year of high school. After touring several schools with direct admit programs, I remember thinking to myself, “Why UW–Madison?” I had to look no further than the culture of the School of Nursing; the staff and faculty encourage students to push themselves and to be the best versions of themselves. To those who work for the School of Nursing, students are not just a name on a roster but rather unique individuals who will one day be the future of health care.

After receiving my acceptance to nursing school, I found myself then saying, “Well, now what?” I had been accepted and was about to start the second half of my college education. I had already been involved with several student organizations, but I wanted to be more involved with the School of Nursing specifically. Then I saw an email that had the job listing for student ambassadors. Being a student of color at a predominately white university made me realize that if I wanted to see change, I would have to be a part of it. I decided to apply for the student ambassador position so that I could advocate for those who felt like their voices were going unheard. Not only do I interact with students from all walks of life, but it is a part of my job to work with the faculty and staff as well.

The School of Nursing constantly highlights the need for nursing leaders. Through my position as a student ambassador, as well as a board member of Health Occupations Students of America (HOSA) and the Student Nurses Association (SNA), I have felt the ability to lead and grow every day. As a student ambassador, I have given tours to potential students and their families, and have had to learn how to communicate with everyone — talking to people is my favorite part of my job! Not only do I give tours to prospective students, but I also walk them through why the UW–Madison School of Nursing might be the best school for them. These communication skills and the ability to work with people from different backgrounds has prepared me well for my future career as a Badger nurse.

The question I am asked most often is, “What does an average day look like for you?” The short answer is BUSY. I have had to learn how to manage my time, which I believe has prepared me to be the best future nurse I can be. Serving on the board for two (amazing) student organizations and as a student ambassador can be stressful. However, UW–Madison has fully equipped me to be the best student leader I can be. The amazing faculty and staff at the School of Nursing are constantly encouraging me to be the best version of myself. It is only with their support that I feel able to be a strong leader, thus it is my pleasure to represent UW–Madison’s School of Nursing.
At much younger ages, Black adults have disproportionately higher risks of developing high blood pressure (hypertension). Both predispositions are long-standing epigenetic and historical evidence of the stress and trauma marginalized Black communities can face. The American Heart Association (AHA) has prioritized cardiovascular health promotion to prevent the chronic health problems associated with hypertension.

Professor Linda Denise Oakley, PhD, RN, is taking the AHA’s heart health message to historically marginalized Black communities and nursing students. As the Louis J. and Phyllis Clark Jacobs Professor in Mental Health, Oakley is committed to using science to find health and well-being solutions to systemic hypertension present in Black communities. Her research, Nurses 4 Black Well-Being, seeks to fully implement the AHA priority by measuring and accurately defining key AHA psychological factors associated with cardiovascular health in marginalized communities.

Oakley is leading a team of nurse researchers and students from the School of Nursing and the School of Medicine and Public Health, and public health nurses with Public Health Madison and Dane County. With this impressive group of minds, her team advances the School of Nursing’s mission and the consensus report on the future of nursing in charting a path to achieve health equity.

“Real health care is not treatment,” Oakley expressed. “It’s not even prevention anymore — it’s promoting well-being and keeping people well.” She envisions the increased awareness of Nurses 4 Black Well-Being throughout the School of Nursing and the community can make equity a priority in cardiovascular health.

To understand the basis of this research, Oakley noted, one must recognize that while ordinary cardiovascular activity (i.e., taking the stairs) may help decrease hypertension for many people, Black people historically have not experienced these health benefits. Studies show that chronic stress reduces the effectiveness of otherwise helpful treatments. Oakley explained that everyday life for marginalized communities can expose people to constant biological and emotional pressure “under the skin” that becomes intergenerational.

“Marginalization is the combination of exploitation and exclusion... in combination with intergenerational epigenetics, it’s what keeps trauma in the community,” said Oakley.

The problem is vast, but Oakley and her research team are looking for solutions by surveying Black communities in Madison and using community engagement strategies to inform accurate models of strength, health promotion, and well-being. Oakley’s goal is to describe self-care methods for reducing this chronic stress pathway to hypertension and poor health.

One of the participants, Brian Bedford, expressed his gratitude for the effort to better the Black community in Madison through this research. Bedford is a social worker with the University of Wisconsin–Madison Odyssey Project, a program that takes a family approach to providing education and opportunities to low-income citizens. He also serves as an alderperson for the city of Madison, representing District 6, and is passionate about breaking down social and political barriers of generational poverty.

“Taking the survey, I was deeply appreciative of some of the questions, especially how it pertained to a historically marginalized people,” said Bedford.

Measuring Peace

First and foremost, Oakley has defined her target population as members of the Black communities in Madison. She indicates that a community is “what we leave in and what we leave out,” encompassing the total environment of individuals who have a shared identity or experience. This clear definition helped her develop a complex sampling method: word of mouth.

“You go to a zip code, and you start on Facebook and with flyers, but the best way to know that you have tapped into a whole community is by having its members pass the message along,” said Oakley. “Those
are the people that are invested in this.”

Bedford is helping recruit participants by talking about the study with people from various outreach programs. In addition to being actively involved in his community, Bedford has experienced his own health complications in his battle with prostate cancer. He understands how stress impacts health outcomes and is excited to see Nurses 4 Black Well-Being confronting these problems head-on.

“It is raising awareness. I am a Black man who is also a prostate cancer survivor; [we] all know that we are at a disadvantage as a subgroup,” said Bedford. “This [research] is vitally important; our health needs, physically or mentally, are not being met.”

With the urgency of this issue in mind, Oakley’s study is underway. Acknowledging that stress is a major complication in all medical conditions, she is measuring how members of these communities define inner “peace.” There is a heavy emphasis on the importance of peace and its meaning to marginalized communities.

“[These] communities are told that blessings are given and received. However, peace is something that I own, it’s mine. Peace means I’m free if I say I’m free,” said Oakley. “Our data suggest that high levels of peace that reduce self-directed anger may increase self-acceptance and well-being in ways that might promote cardiovascular health.”

The bachelor of science in nursing (BSN) student assistants survey all study participants to gather information on their identity and key AHA factors. From their blood pressure levels and how physically active they are, to the stressors in their lives, and their description of peace for them — they are trying to identify accurate measures of positive well-being related to blood pressure. “If you can measure it, you can change it,” said Oakley. She is hopeful that a better understanding of health may be key to decreasing stress-related hypertension in marginalized Black communities.

Nursing is Leadership

Since the days of Florence Nightingale, nurses have been taught to take care of the whole person, even when medicine focused on physical ailments. This holistic approach to health care well-being perfectly positions nurses to lead research looking for quantifiable measures of peace as a potential AHA protective factor.

Oakley explained that this research is a step forward in mental health nursing, and the student leadership team is evolving health care for all communities.

“These students are working to teach people how to take care of themselves, that would be the greatest discovery of all,” said Oakley.

Leadership comes in many forms within Nurses 4 Black Well-Being, but Oakley highlights the doctor of nursing practice (DNP) student leadership team for taking the reins on the study. Their role is to guide undergraduate researchers in data collection and to manage multiple aspects of the study's protocol to ensure accurate results. These leaders rise to every challenge the team meets along the way.

“It is not enough to just be experts in the science, you have to be able to envision the project beyond the obvious to see the possibilities,” said Oakley. “Every day, nurses must problem-solve with not only their clinical expertise but with their ability to understand their observations and manage logistics.”

Oakley wants to continue to inspire this kind of leadership throughout the School of Nursing. Nurses 4 Black Well-Being is purposeful in having Badger nurses reach out to and prioritize mental health care in marginalized communities.

“This is what UW nurses do; if [we] can find a way we’ll hit it and run. It’s why we’re here,” said Oakley.

Nurses 4 Black Well-Being School of Nursing Team:

Linda D. Oakley, Professor
Wan-Chin Kuo, Assistant Professor
Megan Miller, Assistant Professor
Jessica LeClair, PhD Candidate
Rick Voland, Associate Researcher
Anne McKittrick, Aaron Blomberg, Taylor Farnsworth, and Salma Salama, DNP Students
Dana O’Brien, Clinical Professor
Sherell Jackson, Clinical Assistant Professor
Undergraduate ABSN and TBSN Nursing Students
A Passion for Mental Health Care Becomes a Personal Legacy

By Cheyanne Carter

Over the course of her 45-year career, Phyllis Clark Jacobs ’65 shaped the landscape of mental health care and psychiatric nursing. She used her strengths in leadership, research, and education to improve nursing education and community support surrounding mental health. Her passion for this field stemmed from her experience as a Badger; “Phyllis’ time as an undergraduate is what seemed to spark her interest in this field...the researching and exploring she was able to do there stuck with her forever,” said her husband, Louis (Lou) Jacobs. She had developed a vision of mental health care that is now at the forefront of national health care.

Born and raised in Sugar Grove, Illinois, Jacobs graduated from the School of Nursing in 1965. She then went on to receive her master of science in nursing from Washington University’s St. Louis School of Nursing. Jacobs continued to pursue her passions for research and innovation through teaching at several esteemed institutions. Her career took her to Missouri Baptist Hospital School of Nursing, St. Louis University School of Nursing, and Millikin University. Most of it, however, was spent in Kansas at Wichita State University (WSU) School of Nursing. For 23 years Jacobs flourished in sharing her knowledge with future nurses and expanded her research in mental health nursing. During that time, she served as the director of the undergraduate nursing program for 11 years.

Jacobs contributed so much to the field and within her specialty. She published numerous research papers and articles, and contributed several chapters to the Dimensions of Critical Care Nursing journal. She also worked in tandem with the National Council of State Boards of Nursing to curate and review questions for licensing exams. Jacobs’ hard work and passion didn’t go unrecognized. She is an honoree in WSU’s Plaza of Heroines, and she received the WSU President’s Award for Distinguished Service in 2000.

Jacobs had a passion for service and giving back. She volunteered in her community and worked to support her neighbors within areas of mental health. From serving on the County Board of Mental Health in Wichita, Kansas, to leading bereavement support groups, to developing programs in high schools aimed at breaking down stigmas surrounding mental health, Jacobs combined her compassion and expertise to help everyone she could. She continued her passion for philanthropy after retiring in 2013 by establishing the Jacobs...
Scholar Program with her husband, Lou. The program supports graduate students at the WSU School of Nursing.

While her career took her to a handful of universities, her love for being a Badger lasted beyond her lifetime. “We both felt very strongly that our time as undergraduates in Madison had certainly prepared us very well for our professional careers and led to success we had in our lives,” said Lou, also a UW–Madison alumnus. He continued to express that, “the whole experience of [UW–Madison] and Phyllis’ dedication to mental health nursing” led him to establish the Louis J. and Phyllis Clark Jacobs Professorship in Mental Health. Phyllis Clark Jacobs was passionate about establishing the foundations to continue to research and treat mental health as a national priority. Her vision is lived out through the professorship, where her legacy will continue to be a model of excellence in breaking down barriers for mental health care.
Our class experienced tremendous change during our nursing education—both on campus and throughout the world. We witnessed Vietnam War protests, the Watergate scandal dominated the news, and Title IX was passed, all while we prepared to begin our nursing careers. We were pioneers in 1972 when only 5% of nurses nationally had baccalaureate or higher degrees, and we received a world-class education. Our class continued to make significant contributions to practice, education, research, and service throughout our careers. Fifty years sure have flown by quickly!

Our class established two legacy gift opportunities to support future generations of Badger nurses. First, the Global Health Nursing Fund supports student expenses for interprofessional international and local health projects. This fund continues the historical emphasis of exposing students to diverse and underserved populations. Second, we reserved an entire row of seats in the School of Nursing’s auditorium. We have all named a seat in honor of someone who impacted our nursing journey—a parent, faculty member, or friend. If you are interested in helping support either of our class legacy opportunities, please contact Ali Lazar at alison.lazar@supportuw.org.

On, Wisconsin! On, Class of 1972!
Class of 1972

Reflections

What was a significant memory or experience from your nursing education or time on campus?

My favorite experience was the public health summer semester that we spent in Minnesota and North Dakota studying under Bunny Owen. Our class treated and engaged with migrant workers and their families.
– Kathy Capelle Schneider ’72

My favorite memory was during Core Concepts when we were having our first clinical rotations. Jane Fay was our welcoming, capable, and helpful instructor. Our group really bonded from our experiences at University Hospital.
– Bonny Cox Kulick ’72

What was your favorite role in your nursing/professional career?

I was hired three months after graduation working at UW Hospital with general medicine and cardiac medicine patients who were referred from outlying areas of Wisconsin. This was the start of treating hypertension and post-procedure care for patients who had a cardiac catheterization to determine the next steps for their heart health. Pacemakers were also relatively new! EVERYTHING I learned at the UW–Madison School of Nursing, both as a student and then as a staff nurse, prepared me to take on new challenges in the new jobs I worked in over the 48 out of 50 years that I worked.
– Dorinda Cartier ’72

Twenty-five of my 40-year nursing career were spent as an emergency department (ED) nurse. This specialty led me to graduate school and a position as a Clinical Nurse Specialist within the ED. From there I moved into an advanced practice community-based nurse case manager role that was life-changing.
– Sara Grant ’72

My most rewarding position was Professor at the University of Tennessee Health Science Center (UTHSC) in Memphis TN for 27 years. I enjoyed the diverse challenging roles that changed over time without having to change jobs. I was an administrator, Chairperson of Medical-Surgical Nursing, which is really care of hospitalized older adults. As an educator, I helped develop and then taught in the first PhD in Nursing program in Tennessee. I was also an NIH-funded scientist studying health disparities, pain, and end-of-life care of Black and White older adults. And last of all, I was a clinician, practicing as a Geriatric Nurse Practitioner (GNP) in an inner-city Medicaid clinic and developing Tai Chi wellness programs for older adults. Scientist was my favorite role of the four. Relocating from Madison to Memphis TN and UTHSC, located in the mid-South, provided unique opportunities for research questions, faculty practice, and education.
– Veronica Engle ’72

Twenty-five of my 40-year nursing career were spent as an emergency department (ED) nurse. This specialty led me to graduate school and a position as a Clinical Nurse Specialist within the ED. From there I moved into an advanced practice community-based nurse case manager role that was life-changing.
– Sara Grant ’72

Heathcare Effectiveness Data and Information Set (HEDIS) reviews were some of my best experiences as I had a direct impact on care levels in inner city populations. Home care was key but home care administration was some of the most challenging of my entire career.
– Nancy Heins-Glaser ’72

My years at Cedars Sinai Medical Center in Los Angeles pulled everything together for me. While in my role as the vice president of operations, I was able to work in partnership with the physician chairs of the various departments. Together we could leverage and excel in the highest quality of care, pursue cutting edge research, educate and train the next generation of physicians, nurses, and other health care disciplines, and ensure like the “Wisconsin Idea” we spread the evidence across Los Angeles, the state and the nation.
– Linda Kautza Procci ’72

I was the first advanced registered nurse practitioner (ARNP) hired by Naples Community Hospital to staff their Urgent Care track in the emergency room. I helped start a private oncology practice in Naples, Florida, in 1993 and it ultimately became Florida Cancer Specialists, the largest privately owned oncology practice in the country.
– Bonnie Bodin ’72
A Message for the Class of 2022 from the Class of 1972

Congratulations, Class of 2022! You’ve made it through the rigorous preparation for a nursing career that has been a central part of our lives for the past 50 years. You’ve accomplished this amid a global pandemic, demands for social justice, and a period of extreme political polarization.

Our years at the University of Wisconsin–Madison, 1969-1972, were also times of fear, political turmoil, and social unrest and violence in the streets. We remember bearing witness to the Civil Rights Movement, assassinations of Martin Luther King, Jr. and Robert Kennedy, and experiencing the National Guard and police in riot gear on campus. We also can’t forget the bombing of Sterling Hall. These issues added significant stress during our nursing education as current events have added to yours. However, navigating these issues also provided opportunities for growth and personal development.

Nursing’s holistic philosophy of body, mind, and spirit demands personal exploration of these domains. The societal issues we’ve navigated during our respective nursing educational experiences provided a unique context for this self-reflection.

We, the Class of 1972, are confident that you will carry this personal exploration and philosophy forward into your nursing careers. You will be better human beings and compassionate nurses for having endured these tumultuous times and embraced these existential issues during your nursing education.

We have compiled a list of short words of wisdom we’ve gained over 50 years:
• Nurses are change agents.
• Stand by your actions when you are confident in your knowledge base and experience.
• Never be afraid to ask for assistance when you need it.
• Listen to those around you who have sound insight and perspective. They can help you modify your approach to create a better result or outcome.
• Develop collegial relationships with

“I owe my nursing career to my BSN education at the UW–Madison School of Nursing and the many mentors I had throughout my career.”

— DORINDA CARTIER ’72
"I would not be the person I am today without the classroom, experiences, and real-world learnings on the University of Wisconsin-Madison campus in the early ’70s. I am beyond proud to be a Badger nurse, as it brought me to a very fulfilling career and so much more."

- Karen Ransom Harris ’72

You have the tools and abilities to accomplish your dreams. Go forth and sort the wheat from the chaff. We wish you all the best as you join alumnihood and hope that you can look back 50 years from now and be as proud of your alma mater and the preparation you received as we are.

—Members of the UW-Madison School of Nursing Class of 1972: Dorinda Cartier, Veronica “Roni” Engle, Karen Ransom Harris, Nancy Heins-Glaser, Deborah Reitman Judge, Bonny Cox Kulick, Linda Kautza Procci, Kathy Capelle Schneider
In Memoriam

We offer our deepest sympathies to the families and friends of those who have passed away.

Lois Kramschuster, Cert’44
July 6, 2022

Florence Gurholt Wetzel, Cert’44
April 2, 2022

Jane Robertson Palmstrom, Cert’46
May 8, 2022

Elizabeth Schaub, Cert’47, ’49
February 6, 2022

Betty Hess Maragos, Cert’51, ’53
February 13, 2022

Colette Bakke Martin ’52
May 5, 2022

Carol Mattson Porth ’54
July 6, 2022

Patricia Shifrin Hoff, Cert’55
March 25, 2022

Ann Wilson Swift, Cert’56
April 23, 2022

Jean Faris Lawrence, Cert’57
February 15, 2022

Lucy Brainerd Spencer, Cert’57, ’57
March 27, 2022

Barbara Moilien Gruendemann, Cert’58, ’59
July 7, 2022

Clara Gerber ’59
April 20, 2022

Kathryn Fish Cole ’61
June 19, 2022

Marsha Magnusen Hughes ’61
March 25, 2020

Mary Grunke ’64
April 7, 2022

Cherie Calm Frye ’66
March 27, 2022

Kathy Geisler Baird ’68
May 24, 2022

Catherine Craemer Nes ’70
April 6, 2022

Patricia Zierke Wasserstrass ’72
March 13, 2020

Jane Breitenbach Stenske ’72
Date of Death Unknown

Dianne Brunsvold Ellis, MS’74
March 12, 2022

Sharon Gabrielski Schwartz ’75
June 9, 2022

Sheila Belton Dresen, MS’77
March 12, 2022

Phyllis Leuck Maack ’81
March 26, 2022

Nina Michaels ’81
November 22, 2022

Linda Dwyer, MS’87
February 22, 2022

Shirley Beaver ’81, MS’84
April 23, 2022

Jeffrey Everts ’88
April 1, 2022

Sandra Mihalovoic, MS’90
April 15, 2022

Gregory Wahl ’92
January 20, 2022

Teresa Terrill ’97, MS’04
January 19, 2022

Stephanie Sieger Opper ’02
March 9, 2019

Class Notes

• Board of Visitors Chair, Nancy Fraser Michalski ’82 hosted an LA Badger Women luncheon in June for UW-Madison alumni who live in the greater Los Angeles area. Four Badger nurses attended. Pictured left to right: Nancy Fraser Michalski ’82, Linda Kautza Procei ’72, MS’74, Natalie Kustner ’18, and Tararinsey Seng ’18.

• Gail Hansen ’89 was awarded the International Association of Forensic Nurses Frontline Forensic Nurse award for 2021. This award recognizes individuals who provide exceptional direct patient and/or client care in the forensic setting. Gail been employed with the Hennepin Assault Response Team with Hennepin Healthcare for 22 years.

• Patsy Bansley ’93 passed her School of Nursing pin to her daughter, Katie Bansley, who graduated in May 2022.

• Hong Nhan ’20 was admitted to the Columbia University School of Nursing DNP/FNP program and the Johns Hopkins University School of Nursing Dual Degree Pediatric Primary/Acute Care program.
CONGRATULATIONS TO OUR PIN RECIPIENTS OF 2022

The University of Wisconsin–Madison School of Nursing is proud to honor nine graduates with nursing pins, presented by the Nurses Alumni Organization (NAO). A proud tradition of service, select pins are passed on each year from a past graduate to a new graduate as a sign of the recipient’s achievement and promise.

Raquel Burnham, Traditional BSN, donated by Stephanie Swartz ’74
Maica Ho, Traditional BSN, donated by Nancy Dextrom ’66
Chaya Miller, Traditional BSN, donated by Jane Jordan Farrell ’61
Chinaza Nwosa, Accelerated BSN, donated by Eileen Smit ’69, MS ’77
Rey Okone, Traditional BSN, Board of Visitors Pin
David Sohl, Traditional BSN, Dean’s Pin
Ashley Thomas, Traditional BSN, donated by Molly Meyer ’71
Max Wuest, Traditional BSN, donated by Cathryn Eckberg ’71
Nancy Yang, Traditional BSN, donated by Mary Moat, CERT ’77, MS ’82

If you are interested in donating your nursing pin, please contact alumni@son.wisc.edu to learn more.

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ALUMNI@SON.WISC.EDU

CREATE YOUR LEGACY.

Give back to the School of Nursing by including us in your estate plans or through other forms of giving. Contact our Development Team for details!

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